

WV Online Case Management (CM) Pilot Project

Core Workflow Guide

Revised Apr. 11

A. Assessments

Participants are assigned to a Case Manager (CM) and a Registered Nurse (RN), who conduct a joint visit for the Person-Centered Assessment (PCA) every six months – with separate sections for the CM and RN. For existing ADW Participants, the workflow is slightly different when data are entered in the WellSky system for the initial cycle. Subsequently, Agency workers can duplicate the previous Assessment to streamline data entry. The workflow is also slightly different for Agency workers who have mobile devices (e.g., laptop, tablet) to document during visits using Mobile Assessments rather than paper. Such differences are detailed below.

A.1 Initial Cycle

Agency workers prep for the visit by entering Legal Representatives and other people in the Case Relations page, and by adding the Assessment in the Clinical Documents page with partial information using the previous paper form. For mobile users, they download the Assessment to the device to work off-line; for paper, they print the Assessment in progress. They also print signature pages.

After the visit they complete data entry in the WellSky application, including updates to Case Relations – keeping the name only in Clinical Documents. For the PCA – Section 1 (CM), CMs update the Status to “Complete” and link it to the Service Plan, which “pushes” the Risks. In addition, CMs update the Demographics page with any insurance information.

A.1.a Prep

1. *Select Participant from Tickler*

Go To: My Work Lists > Ticklers

Role: CM or RN

1. View manual tickler: “PCA – Section 1 (CM) due” or PCA – Section 2 (RN) due”

(Flyout menu - View Participants record)

1 Ticklers record(s) returned - now viewing 1 through 1

ID	Tickler	Assigned To	Participant	Date Created	Date Due	Date Completed	Status	
10022	Person Centered Assessment - Section 1 (CM) due	Greenberg, Debby	Fultz, Francisco	01/16/2019	01/16/2019		New	►

2. *Legal Representative: If in data conversion, update Relationship to specify*

Go to: Case Relations

Role: CM

1. Check if existing Relation in list view grid and select to open record
 2. Edit Primary Relationship field to specify value
 3. Add values in Other Relationships field as needed
 4. Add contact info
- (File menu - Save and Close)

3. *Legal Representative: If not in conversion, add Relation and Relationship*

Go to: Demographics

Role: CM

1. Select Legal Representation = 'Yes'
- (File menu - Save and Close)
2. Enter Case Relation with Workflow Wizard tickler, then complete and close

Workflow Wizard
Add Legal Representative Select or enter person, select Primary Relationship, and identify other Relationships as needed

Filters

Active Equal To Yes AND

Last Name +

Search Reset

3 Case Relations record(s) returned - now viewing 1 through 3

Last Name	First Name	Primary Relationship	Crisis Backup	Active	Street	Street 2	City	State	Zip	Home Phone	Work Phone	Cell Phone	Email	Fax
Test	Relation	Legal - Attorney	Yes	Yes	3 Lincoln St		Accoville	WV	25606	(304) 888-9999				
Test	Legal	Legal - Representative Payee	No	Yes										
Test	Computer	Family - Other	No	Yes										

4. *Add Case Relations (family, medical, and other)*

Go to: Case Relations

Role: CM

- (File menu - Add New Case Relations Search)
1. Click Search button, then Add New button
 2. Complete fields as needed
- (File menu - Save and Close)

 **WellSky** Human Services
Formerly Medware Harmony

February Test
2/18/2019 5:39 PM

Case Relations Search

File

Filters

Search Reset Add New

0 record(s) returned

5. *Add Assessment: PCA - Section 1 (CM) or Section 2 (RN)*

Go To: Clinical Documents

Role: CM or RN

(File menu – Add)

1. Select document
 2. Enter header info
 - a. Type = '6 Month' or 'Annual'
 - b. Date (default = today, edit as needed)
 - c. Status = 'Draft' (default)
 3. Enter info from previous assessment
- (File menu – Save and Close)

Please Select Type: Person-Centered Assessment - Section 1 (CM) ▼

Clinical Documents			
Type *	6 Month ▼	Date (Assessment / Service Plan Start / Contact) *	02/18/2019
Worker *	Greenberg, Debby ... Clear Details	Status *	Draft ▼
Assignments *	ADW	Date Completed	

6. *Mobile: Download document to work off-line*

Go To: Mobile Assessments

Role: CM or RN

1. Select Participant by entering last name in Search
2. View list of matches and click on Open button
3. Click on Make Available Offline button

Search
 History
 Downloaded
 Notifications

Make Available Offline

Consumer #11344 - Test, February

New	Date (Assessment / Service Plan Start / Contact)	Form
Open ▼	2/15/2019	Contact - Registered Nurse

7. *Paper: Print draft assessment*

Go To: Clinical Documents

Role: CM or RN

1. Select document
- (File menu - Print or Report menu)

8. *Print 3 signature pages - Assessment (2 copies), Service Plan*

Go To: Clinical Documents (List View)
(Word Merge menu)

Role: CM or RN

1. Select and print

A.1.b Complete

1. *Mobile: Complete fields*

Go To: Mobile Assessments

Role: CM or RN

1. Enter all info
2. Click on 'Save'
3. Status = 'Draft' for PCA - Section 1 or 'Complete' for PCA - Section 2

2. *Paper: Complete fields*

Go To: Clinical Documents

Role: CM or RN

1. Open document in list view grid and enter info
(File menu – Save)

3. *Add Case Relations*

Go To: Case Relations, Clinical Documents
(File menu - Add New Case Relations Search)

Role: CM, RN

1. Click Search button, then Add New button
2. Complete fields as needed
(File menu – Save and Close)
3. Edit Case Relations in Assessment to name only
(File menu – Save and Close)

4. *PCA - Section 1: Complete Status and link to new Service Plan (push Risks)*

Go To: Clinical Documents

Role: CM

1. Open document
2. Update Status = 'Complete'
(File menu – Save)
3. Click on 'Link to New' button
(File menu – Close)



This assessment contains responses that should be considered for inclusion on a plan. Do you want to link this assessment to a new or existing plan?

Link to New Link to Existing Don't Link

A.1.c Additional

1. *Add Medicare and private insurance info from PCA - Section 1 as needed*

Go To: Demographics

Role: CM

(Edit menu)

1. Enter in Insurance Info section at bottom

(File menu – Save and Close)

Insurance Info	
Medicare ID	<input type="text" value="787878787"/>
Medicare Insurance	<input type="text" value="B only"/>
Private Insurance	<input type="text" value="Humana"/>

A.2 6 Month or Annual

Ticklers are triggered when the PCA – Section 1 (CM) is complete to remind Agency workers that the next Assessment is due in 180 days, with an alert 60 days prior to the due date. They duplicate the previous Assessment and prep using other information entered from other pages.

1. *Tickler: PCA - Section 1 or 2 (6 Month or Annual)*

Go To: My Work Lists > Ticklers

Role: CM or RN

1. View work list and check Date Due

(Fly-out menu - View Participants Record)

2. *Duplicate previous assessment*

Go To: Clinical Documents

Role: CM or RN

1. Select previous record in list view

(File menu – Duplicate)

2. Enter header info:

a. Type = '6 Month' or 'Annual'

b. Date (default today, edit as needed)

c. Status = 'Draft' (default)

(File menu – Save)

3. Update info from other pages entered since last assessment

Go To: Clinical Documents
1. Enter body info
(File menu – Save and Close)

Role: CM or RN

4. Mark tickler as Complete

Go To: Ticklers menu
(Fly-out menu – Complete)

Role: CM or RN

A.3 Update as Needed - Major Change

If the Participant has a major change, the Assessments are updated at that time and the existing ticklers are cancelled to reset the “clock”.

1. Duplicate previous assessment

Go To: Clinical Documents
Same as A.2 with Type = 'As Needed'

Role: CM or RN

2. Cancel previous tickler to reset 6-month timetable

Go To: Ticklers menu
1. View tickler (uncheck Alert Days as needed)
(Fly-out menu – Cancel)

Role: CM or RN

B. Service Plan

CMs are responsible for developing the Service Plan, with input from the RNs. RNs print the Personal Attendant Log (PAL) template based on the Functional Assessment; they also enter the “Amount and Frequency” of the PA service. Like the Assessments, the workflow is slightly different when data are entered for the initial cycle. Subsequently, Agency workers can duplicate the previous Service Plan -- Supplement to streamline data entry. The workflow is also slightly different for Agency workers who have devices to document using Mobile Assessments.

B.1 Initial Cycle

CMs prep and complete the Service Plan – Supplement in Clinical Documents, following the Assessment as part of the same visit. A tickler is triggered when the PCA – Section 1 (CM) is complete to remind the CM that the Service Plan is due within 7 days of the Assessment date.

CMs enter data in the various sub-pages of the Service Plan. Then they complete the Service Plan – Supplement, Case Relations, and Notes as needed.

When the Service Plan is done, CMs update the Plan Status to “Active”. Then they print and send the Assessment and Service Plan reports to the Participant, adding the date shared on the signature pages. They make an electronic copy of the signature pages, adding a Note with the file attached in Plan Notes. Finally, they add a Note with the date shared with the Participant.

B.1.a Supplement Document – Prep

1. Add Service Plan - Supplement document

Go To: Clinical Documents

Role: CM

(File menu – Add)

1. Select document

2. Enter header info:

a. Type = '6 Month' or 'Annual'

b. Date (default = today, edit as needed)

c. Status = 'Draft' (default)

(File menu – Save)

2. Enter info from previous Service Plan form (paper)

Go To: Clinical Documents

Role: CM

1. Enter body info

(File menu - Save and Close)

3. Mobile: Download document to work off-line

Go To: Mobile Assessments

Role: CM

1. Select Participant by entering last name in Search

2. View list of matches and click on Open button

3. Click on Make Available Offline button

4. Paper: Print draft document

Go To: Clinical Documents

Role: CM

(File menu - Print or Report menu)

B.1.b Plan Info and Dates

1. Tickler: Service Plan

Go To: My Work Lists > Ticklers

Role: CM

1. Open tickler “Service Plan”

2. Select Service Plan in list view OR View Participant record in Fly-out menu

2. Complete Plan Info and Dates

Go To: Service Plans > Plan Info and Dates

Role: CM

1. Add Service Plan details:

- Select Type = '6 Month' or 'Annual'
- Enter Start Date and End Date
- Case Manager = self (default)
- Select Registered Nurse
- Status = 'Pending' (default)

(File menu – Save)

Plan Info and Dates	Type *	6 Month	▼
Risks and Interventions	Start Date *	02/13/2019	
Services	End Date *	02/28/2019	
Plan Notes	Case Manager *	Greenberg, Debby	▼
QA Review	Registered Nurse *	Hudson, Arlene	... Clear Details
	Status *	Pending	▼
	Update Date 1	02/14/2019	
	Update Date 2		
	Update Date 3		
	Update Date 4		
	Last Modified	2/19/2019 6:47:40 AM	
	Last Modified By	dgreenberg	
	Comments	comments	

B.1.c Risks and Interventions

1. Review Risks and update Status

Go To: Service Plans > Risks and Interventions

Role: CM

1. Open Risk and update Status = 'Active'

(File menu - Save and Close)

Plan Info and Dates	Risks and Interventions		
Risks and Interventions	COLLAPSE ALL ADD RISK		
Services	<input checked="" type="checkbox"/> Risk: Home/Neighborhood - Is the home isolated from other homes in the area (no visible neighbors)?	Active	▼
Plan Notes	Intervention: PERS (Personal Emergency Response System)	Active	▼
	Risk: Needs - Do you have problems hearing people, alarms, the TV, etc.?	Proposed	▼

2. Add Intervention(s) for each Risk

Go To: Service Plans > Risks and Interventions

Role: CM

1. Click on flyout menu to ADD INTERVENTION to a given Risk;
 2. Enter Intervention details:
 - a. Select ID
 - b. Intervention (auto-populate), edit as needed including to provide details
 - c. Status = 'Active' (default)
 - d. Date Added or Edited = today (default)
- (File menu – Save and Close)

Risk	ID *	8075	...
	Intervention	Other - Add description here	
	Status	Active	
	Date Added or Edited	02/19/2019	

B.1.d Services

1. Identify ADW Service Needs

Go To: Clinical Documents

Role: CM

1. Open PCA - Section 1 to view Service/Resource Needs (section 8)

2. Add Services

Go To: Service Plans > Services

Role: CM

(File menu – Add Planned Service)

1. Enter Service details:
 - a. Start and End Dates (default from Plan Info)
 - b. Select Service Code to auto-populate Service Description
 - c. Select Agency ID to auto-populate Agency
 - d. Enter Amount and Frequency

(File menu – Save and Add Another OR Save and Close)

Service	Start Date *	02/13/2019	...
	End Date *	02/28/2019	...
	Service Code *	G9002	...
	Service Description	Case Management	
	Agency ID *	10003	... Details
	Agency	A Special Touch for Seniors	
	Amount and Frequency	3 times per week, 2 times per day	

B.1.e Supplement Document - Complete

1. *Mobile: Complete fields and update Status*

Go To: Mobile Assessments

Role: CM

1. Enter all info
2. Click on Save
3. Update Status = 'Active'

2. *Paper: Complete fields and update Status*

Go To: Clinical Documents

Role: CM

1. Open document in list view grid and enter info
(File menu - Save and Close)

3. *Enter Crisis Backup relations*

Go To: Case Relations

Role: CM

1. Open record and check box for Crisis Backup
(File menu – Save and Close)

B.1.f Notes

1. *Medication Profile: Enter Plan Note*

Go To: Service Plans > Plan Notes

Role: RN

(File menu – Add)

1. Enter Note details:
 - a. Date (default = today)
 - b. Note By (default = self)
 - c. Note Type = 'Documentation - Plan'
 - d. Note Sub-Type = 'Medication Profile'
 3. Add Attachment and/or Note Recipient as needed
 - f. Select Status = 'Complete'
- (File menu – Save and Close)

2. *Dual Services: Enter Plan Note*

Go To: Service Plans > Plan Notes

Role: CM

- a. Note Type = 'Documentation - Plan'
- b. Note Sub-Type = 'PC POC'
- c. Enter Subject and Note Details (optional)
- d. Add Attachment and/or Note Recipient as needed
- e. Select Status = 'Complete'

3. Overdue Assessment: Enter and send Note

Go To: Notes

Role: CM or RN

- a. Note Type = 'Case Note - CM' or 'Case Note – RN'
- b. Note Sub-Type = 'Assessment/Service Plan Due'
- c. Status = 'Alert'
- d. Note Recipient = RN or CM

4. Behavior issues: Enter Note

Go To: Notes

Role: CM

- a. Note Type = 'Behavior/Environment'
- b. Note Sub-Type = 'Behavior Contract' or 'Summary of Issues'
- c. Status = 'Complete'

B.1.g Complete Service Plan

1. Print and send PAL template to PA

Go To: Clinical Documents

Role: RN

1. Open PCA - Section 2
(Word Merge menu – select PAL)
2. Save file to desktop, then print

3. Attach PAL template to Plan Note

Go To: Service Plans > Plan Notes

Role: RN

- a. Note Type = 'Documentation - Plan'
- b. Note Sub-Type = 'PAL Upload'
- c. Add Attachment
- d. Select Status = 'Complete'

4. Add Amount and Frequency for PA service

Go To: Service Plans > Services

Role: RN

1. Open PA service and edit field
(File menu – Save)

5. Update Plan Status to Active

Go To: Service Plans > Plan Info and Dates

Role: CM

1. Update Status = 'Active'
(File menu – Save)

6. Obtain signatures on signature pages during Assessment

Go To: (non-WellSky process)

Role: CM

7. Print and send Assessment and Service Plan reports to Participant

Go To: Clinical Documents

Role: CM

1. Select document

(Reports menu – select report)

2. Download to desktop as PDF format using Disk icon

3. Print file

8. Add date that summary shared with Participant on signature pages

(non-WellSky process)

Role: CM

9. Add Note with attachment for signature pages

Go To: Service Plans > Plan Notes

Role: CM

a. Note Type = 'Documentation - Plan'

b. Note Sub-Type = 'Signed Assessment/Service Plan'

c. Add Attachment

d. Note Recipient = RN to communicate Service Plan is done

10. Add Note with date summary shared with Participant

Go To: Notes

Role: CM or RN

a. Note Type = 'Summary Shared with Participant'

b. Note Sub-Type as appropriate for CM or RN

c. Edit Date as needed for date shared

11. Tickler: Summary Share - Assessment and Service Plan

Go To: Ticklers menu

Role: CM or RN

(Fly-out menu – Complete)

B.2 6 Month or Annual

CMs duplicate the Service Plan -- Supplement and prep using the previous Service Plan to identify any updates. They also update the previous Service Plan Status as "Complete".

1. Duplicate previous Service Plan - Supplement

Go To: Clinical Documents

Role: CM

1. Open previous document
(File menu – Duplicate)
 2. Edit header info:
 - a. Type = '6 Month' or 'Annual'
 - b. Date (default = today, edit as needed)
 - c. Status = 'Draft' (default)
- (File menu – Save)

2. View previous Service Plan to identify any updates

Go To: Service Plans

Role: CM

1. Open Service Plan in list view
2. Review comments and Notes

3. Update info in duplicated Supplement document

Go To: Service Plans

Role: CM

1. Enter body info
 2. Update Status = 'Active'
- (File menu - Save and Close)

4. Update Status of previous Service Plan as complete

Go To: Service Plans > Plan Info and Dates

Role: CM

1. Select Service Plan in list view
 2. Update Status = 'Complete'
- (File menu - Save and Close)

B.3 Update as Needed - Minor Change

If the Participant has a minor change that does not require a new Assessment, the Agency workers document it and add an Alert Note to review with one another. For changes initiated by CMs, they update Risks and Interventions and the Service Plan – Supplement as needed. For changed initiated by RNs, they print the PAL template as needed.

Initiated by CM:

1. Document date and change

Go To: Service Plans > Plan Info and Dates

Role: CM

1. Open Service Plan record from list view
2. Select Update Date
3. Enter change in Comments including Update Date as reference
(File menu - Save and Close)

2. Add new Risks as needed

Go To: Service Plans > Risks and Interventions

Role: CM

1. Click on ADD RISK
 2. Enter Risk details:
 - a. Select Risk ID for Risk to auto-populate
 - b. Status = 'Active' (default)
 - c. Date Added or Edited = today (default)
- (File menu - Save and Close)

3. Update existing Risks and Interventions

Go To: Service Plans > Risks and Interventions

Role: CM

1. Open Risk or Intervention record
 2. Edit details as needed:
 - a. Status = 'Complete'
 - b. Date Added or Edited
 - c. Edit Intervention text (optional)
- (File menu - Save and Close)

4. Update Supplement document as needed

Go To: Clinical Documents

Role: CM

1. Open document and edit
(File menu - Save and Close)

5. Enter and send Alert Note to RN to review change

Go To: Service Plans > Plan Notes

Role: CM

(File menu – Add)

1. Enter Note details:

- a. Date = today (default)
- b. Note By = self (default)
- c. Note Type = 'Documentation - Plan'
- d. Note Sub-Type = 'PAL/Service Plan Update'
- e. Enter Subject and Note Details
- f. Note Recipient = RN worker
- g. Status = 'Alert'

(File menu - Save and Close)

6. Review Alert Note and append comment

Go To: My Work Lists > Alert Notes

Role: RN

1. Open Note and 'Mark as Read' in Tools menu

2. Append comment

3a. If OK, update Status = 'Complete'

3b. If problem, add Note Recipient = CM worker

(File menu - Save and Close)

Initiated by RN:

1. Document date and change

Go To: Service Plans > Plan Info and Dates

Role: RN

1. Open Service Plan record from list view

2. Select Update Date

3. Enter change in Comments, including update date for reference

(File menu – Save)

Go To: Service Plans > Services

4. Open PA Service record from list view

5. Enter change in Amount and Frequency

(File menu - Save and Close)

2. Print updated PAL template as needed

Go To: Clinical Documents

Role: RN

1. Download and edit Word Merge file

3. Enter and send Alert Note to CM to review/approve change

Go To: Service Plans > Plan Notes

Role: RN

(File menu – Add)

1. Enter Note details:

- a. Date = today (default)
- b. Note By = self (default)
- c. Note Type = 'Documentation - Plan'
- d. Note Sub-Type = 'PAL/Service Plan Update'
- e. Enter Subject and Note Details
- f. Attach updated PAL template as needed
- g. Note Recipient = CM worker
- h. Status = 'Alert'

(File menu – Save and Close)

4. Review Alert Note and append comment

Go To: My Work Lists > Alert Notes

Role: CM

1. Open Note and 'Mark as Read' in Tools menu

2. Append comment

3a. If OK, update Status = 'Complete'

3b. If problem, add Note Recipient = RN worker

(File menu - Save and Close)

C. Ongoing Monitoring

CMs and RNs monitor Participants on an ongoing basis and document their contacts and internal communication. CMs are required to initiate contacts every calendar month, which are entered in Clinical Documents. RNs conduct visits as needed, which are entered in Clinical Documents. RNs review the PALS weekly (or periodically) and attach to Plan Notes. Both enter Notes as needed.

C.1 CM Monitoring

1. *Document phone or face-to-face contact*

Go To: Clinical Documents

Role: CM

(File menu – Add)

1. Select document “Contact – Case Management Monthly”
 2. Enter header info:
 - a. Type = 'Contact'
 - b. Date (default = today, edit as needed)
 - c. Status = 'Draft' (default)
 3. Complete body of document
 4. Update Status = 'Complete'
- (File menu – Save and Close)

C.2 RN Monitoring

1. *Review Personal Attendant Log (PAL) and attach to Plan Note*

Go To: Service Plans > Plan Notes

Role: RN

(File menu – Add)

1. Enter Note details:
 - a. Date = today (default)
 - b. Note By = self (default)
 - c. Note Type = 'Documentation - Plan'
 - d. Note Sub-Type = 'PAL/Service Plan Update'
 - e. Enter Subject and Note Details
 - f. Attach copy of PAL
 - g. Status = 'Complete'
- (File menu – Save and Close)

2. *Document visit*

Go To: Clinical Documents

Role: RN

1. Same as C.1 above except select document “Contact – Registered Nurse”

D. Service Plan - Quality Assurance (QA)

BoSS Reviewers complete the QA Review for a sample of Service Plans monthly. If they identify an issue that requires remediation, they send an Alert Note to the CM.

D.1 QA Review

1. Select Participants for monthly audit

Go To: My Work Lists > Ticklers

Role: BoSS Reviewer

1. View and select records for 'Service Plan - Ready for QA Review' (Fly-out menu – Reassign)
2. View selected record in Assigned To column
3. Click hyperlink or Fly-out menu - View Participants Record

16 Ticklers record(s) returned - now viewing 1 through 15

ID	Tickler	Assigned To ▼	Participant	Date Created	Date Due	Date Completed	Status	
11188	Service Plan - Ready for QA Review	Greenberg, Debby	Cascio, Cassidy	02/05/2019	02/05/2019		New	▶
10010	Service Plan - Ready for QA Review	Greenberg, Debby	Bartels, Kelsey	02/11/2019	02/11/2019		New	▶
10022	Service Plan - Ready for QA Review	BoSS Reviewer	Fultz, Francisco	01/11/2019	01/11/2019		New	▶
10664	Service Plan - Ready for QA Review	BoSS Reviewer	Hight, Cassie	01/14/2019	01/14/2019		New	▶

2. Review Service Plan

Go To: Service Plans, Clinical Documents

Role: BoSS Reviewer

1. View Service Plan sub-pages, 3 Clinical Documents, and PAL

3. Complete QA Review

Go To: Service Plans > QA Review

Role: BoSS Reviewer

(File menu – Add)

1. Select document
2. Enter Date for Service Plan Start in body
3. Complete questions and comments
(File menu – Save and Close)

Please Select Type: Service Plan - Quality Assurance Review ▼

QA Review	
Date of Review *	02/19/2019
Worker *	Greenberg, Debby ▼
Status *	Draft ▼
<hr/>	
Service Plan - Start Date:*	02/01/2019
1. Update Plan: Was the Service Plan updated annually, every six months, and revised as needed?*	No ▼
1. Update Plan - Comments:*	<div></div>

D.2 Service Plan Remediation

1. *Send Alert Note to Case Manager*

Go To: Notes

Role: BoSS Reviewer

(File menu – Add)

1. Enter Note details:

- a. Date = today (default)
- b. Note By = self (default)
- c. Select Note Type = 'Quality Assurance'
- d. Select Note Sub-Type = 'Remediation'
- e. Enter Subject and Note Details
- f. Search for Note Recipient = CM worker
- g. Select Status = 'Alert'

(File menu – Save and Close)

2. *View and send Note back to BoSS Reviewer*

Go To: My Work Lists > Alert Notes

Role: CM

1. Open Note record and 'Mark as Read' in Tools menu
 2. Append comment
 3. Select Note Recipient = BoSS Reviewer
- (File menu - Save and Close)

3. *View and complete Note*

Go To: My Work Lists > Alert Notes

Role: BoSS Reviewer

1. Open Note record and append comment
 2. Update Status = 'Complete'
- (File menu – Save and Close)