

West Virginia (WV)
Bureau for Medical Services (BMS) and
Bureau of Senior Services (BoSS)

Online Case Management (CM) Pilot
Project

Core Workflow Training Guide

Final version, June 14, 2019



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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 using separate Clinical Documents. The workflow is slightly different for data entered in WellSky for the initial cycle. Subsequently, Agency workers duplicate the previous Assessment to streamline data entry. The workflow is slightly different for Agency workers using mobile devices to document during visits, using Mobile Assessments rather than paper. Those 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. Mobile users download it to the device to work off-line; other users print the Assessment in progress. They all 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. CMs update the Status to “Complete” and link it to the Service Plan to “push” the Risks. CMs also 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 and add values in Other Relationships field
3. 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 Mediware 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:

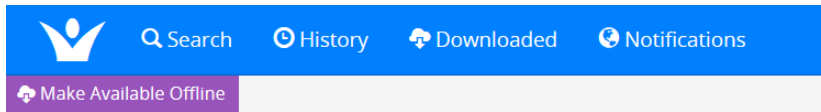
Clinical Documents			
Type *	<input type="text" value="6 Month"/>	Date (Assessment / Service Plan Start / Contact) *	<input type="text" value="02/18/2019"/>
Worker *	<input type="text" value="Greenberg, Debby"/> ... <input type="button" value="Clear"/> Details	Status *	<input type="text" value="Draft"/>
Assignments *	<input type="text" value="ADW"/>	Date Completed	<input type="text"/>

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



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)

Role: CM or RN

1. Select and print
(Word Merge menu)

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

Role: CM, RN


- (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)
 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)

Link Assessment to Plan 

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?

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 Assessment and enter the “Amount and Frequency” of the PA service. The workflow is slightly different for data entered for the initial cycle. Subsequently, Agency workers duplicate the previous Service Plan -- Supplement to streamline data entry. The workflow is slightly different for Agency workers using devices for 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 10 business 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”. 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 signature pages, adding a Note with the file attached.

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.1.1.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:
 - a. Select Type = '6 Month' or 'Annual'
 - b. Enter Start Date and End Date
 - c. Case Manager = self (default)
 - d. Select Registered Nurse
 - e. 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)

Risks and Interventions		
COLLAPSE ALL ADD RISK		
<input checked="" type="checkbox"/>	Risk: Home/Neighborhood - Is the home isolated from other homes in the area (no visible neighbors?)	Active
	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
(File menu – Add Planned Service)

Role: CM

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 Note

Go To: Notes

Role: RN

(File menu – Add)

1. Enter Note details:

- a. Date (default = today)
- b. Note By (default = self)
- c. Note Type = 'Documentation'
- d. Enter Subject and Note Details (optional)
- e. Add Attachment with Category = 'Medical'
- f. Select Status = 'Complete'

(File menu – Save and Close)

2. Dual Services (as needed): Enter Note

Go To: Notes

Role: CM

- a. Date (default = today)
- b. Note By (default = self)
- c. Note Type = Documentation
- d. Enter Subject and Note Details (optional)
- e. Add Attachment with Category = 'PC POC'
- f. Select Status = 'Complete'

(File menu – Save and Close)

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 Note

Go To: Notes

Role: RN

- a. Note Type = 'Documentation'
- b. Add Attachment with Category = 'PAL'
- c. 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*

(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: Notes

Role: CM or RN

- a. Note Type = 'Documentation'
- b. Add Attachment with Category = 'Signature Page'
- c. Select Status = 'Complete'

10. *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: Notes

Role: CM

(File menu – Add)

1. Enter Note details:

- a. Date = today (default)
- b. Note By = self (default)
- c. Note Type = 'Case Note - CM'
- d. Enter Subject and Note Details
- e. Note Recipient = RN worker
- f. 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: Notes Role: RN
(File menu – Add)
1. Enter Note details:
 - a. Date = today (default)
 - b. Note By = self (default)
 - c. Note Type = 'Documentation'
 - d. Enter Subject and Note Details as needed
 - e. Add Attachment with Category 'PAL'
 - f. Note Recipient = CM worker
 - g. 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

Agency workers monitor Participants and document their contacts in Clinical Documents and internal communication in Notes. CMs are required to initiate contacts monthly (due by the end of the month). RNs conduct visits as needed, and review the PALs weekly (or periodically) and may attach to Notes.

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 Note*

- Go To: Notes Role: RN
(File menu – Add)
1. Enter Note details:
 - a. Date = today (default)
 - b. Note By = self (default)
 - c. Note Type = 'Documentation'
 - d. Enter Subject and Note Details
 - e. Add Attachment with Category 'PAL'
 - f. Status = 'Complete'
- (File menu – Save and Close)

2. *Document visit*

- Go To: Clinical Documents Role: RN
(File menu – Add)
1. Select document “Contact – Registered Nurse”
 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)

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	▶
10864	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 * Worker * Greenberg, Debby ▼

Status * Draft ▼

Service Plan - Start Date:*

1. Update Plan: Was the Service Plan updated annually, every six months, and revised as needed?* No ▼

1. Update Plan - Comments:*

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)