4/18/2022

Custom Form Builder

Custom Form Builder and Publishing Guide

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Creating/Building a Form

Before you can publish and use a form, you will need to use the Custom Form Builder Module to create the questionnaire/form first. To open this module you will need to have Super Admin or Admin level access. From the AccuCare Ribbon go to Setup \rightarrow System \rightarrow Custom Form Builder

AccuCare	😩 🚨 🚨	. 🖏 📥 🗳	2 💽 🕄	3 📼 💼	Welcome, Ron Super Admin
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					Location of Service
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<u> </u>) 🧼			7	System
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					Level of Care
					Placement Domains
-					Treatment Service Review
					Referral Letters
					Session Types
					Decision Support



Setup →Custom Form Builder

tup > Custom Form Builder							
Name	Assigned Categories	Assigned Module(s)	Created By	Last Modified	Published	Archived	Sel
ADULT SUBSTANCE ABUSE DISORDER ASSESSMENT	General Collection of Information Mental Health Asmt Non-DUI Medical Screening	Assessments Client Intake	Ron S Admin	06/19/2020	Yes	No	
Client Collection Sheet	General Collection of Information	Client Intake	Ron S Admin	06/19/2020	Yes	No	
Data C s V2			Ron S Admin	06/10/2020	No	No	
Data Collection Sheet	General Collection of Information	Client Intake	Ron S Admin	09/12/2019	Yes	Yes	
Data Collection Sheet V.2	General Collection of Information	Client Intake	Ron S Admin	09/12/2019	Yes	No	
Emergency Contact and Medical Information			Ron S Admin	09/10/2019	Yes	No	
M H Assessment Test Form	Mental Health Asmt	Client Intake	Ron S Admin	09/26/2019	No	No	
Mental Health Asmt V.2			Ron S Admin	03/13/2020	No	No	
Mental Health Assessment rev 4.12.17	Mental Health Asmt	Admission/Discharge Assessments Client Intake Scheduler Screening Tools/Supplements	Staff	12/05/2018	Yes	No	
NICASA Test Supplemental Question Revised 121019	General Collection of Information	Client Intake	Ron S Admin	04/17/2020	No	No	
Non-DUI Medical Screening	Non-DUI Medical Screening	Admission/Discharge Assessments Client Intake Scheduler Screening Tools/Supplements	John B. Trainer	04/17/2020	Yes	No	
Test Build			Ron S Admin	06/10/2020	No	No	Г
1							
dd button – allows you eate a new unpublished stom form.		$\langle \rangle$		[Delete] to delete	button – unpubli	allows allows	yo rm
[E e h	Edit] button – allows y dit existing custom for ave not been publishe	ou to rms that ed.	[Create create an unp	e Copy] butt a copy of ei ublished cu	on – allo ther a pu stom for	ows you ublished m	ı to d oı



Setup → Custom Form Builder

Name							
	Assigned Categories	Assigned Module(s)	Created By	Last Modified	Published	Archived	Sele
ADULT SUBSTANCE ABUSE DISORDER ASSESSMENT	General Collection of Information Mental Health Asmt Non-DUI Medical Screening	Assessments Client Intake	Ron S Admin	06/19/2020	Yes	No	
Client Collection Sheet	General Collection of Information	Client Intake	Ron S Admin	06/19/2020	Yes	No	
Data C s V2			Ron S Admin	06/10/2020	No	No	
Data Collection Sheet	General Collection of Information	Client Intake	Ron S Admin	09/12/2019	Yes	Yes	
Data Collection Sheet V.2	General Collection of Information	Client Intake	Ron S Admin	09/12/2019	Yes	No	
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Test Build			Ron S Admin	06/10/2020	No	No	•
		オ	7				
[Demo Form] button "sandbox" that allow how the form will lo during use after pub	n – is a w you to test ok and behave plishing.		/		[Close] module the Mai	button and ref	– Clos turns



Setup →Custom Form Builder – Add Button

Add Edit	Create Copy	Delete	Preview Report	Demo Form	Publish	Archive	Close
Accul	Care						
Setup > Custom	Form Builder						
Form Details -							
Form Name:	←						
Insert Merge Fi	elds 👻 🍤 🗸	6	X E				
Font	+ Font	Size 👻	e e				
		F	f irst line – Form N here.	Name – Create	the name	of form	
		Secon the cu <u>next p</u>	d Line – Allows yo stom form along ages for more de	ou to add dem with other sta etail & expland	ographic p ndard com <u>ution)</u>	laceholders t mands. (<u>See</u>	:0
		Third Choos <u>next p</u>	Line – Allows for ing fonts, Font Si ages for more de	additional com zes, Left justifi e tail & explanc	nmands - Fo ed, Right Ju ntion)	or Example: ustified etc	(<u>See</u>



Second Line - [Insert Merge Fields] - Detailed Explanation

Insert Merge Fields 🔹 🍤 🕶 🎇 📲	🖺 B I <u>U</u> e -
Date 🗲 📤	Admission Date
Client First Name	
Client Last Name	(i Date
Client Date Of Birth	C Location Of Service
Client Address	G
Client City	Ci Referral Reason
Client State	G Referral Source
Client Zip Client Phone Number 1	
Client Billing Reference Number	G Service Requested
Social Security #	G User
Gender	
Client Reference #	
Nick Name	
Email Address	Each of these choices can be added to your cust
Tribe of Membership	form builder.
Comments	What this means. These placeholders allow yo
Referring Provider First Name	pull data from other locations with AccuCare. (S
Referring Provider Middle Initial	Fig. 2A and 2B)
Referring Provider Last Name	
Referring Provider Suffix	
Client Billing Info Comment	
Marital Status	
Employment Status	
Religion	
Race	
Ethnic Group	

Each of the choices above would give you a generic demographic placeholder. For Example, the Client First Name would look like this **##FirstName##** on your creation.

<u>What this means</u>: There is a placeholder, which allows you to pull demographic information from the Client Intake Module. **(See Fig. 1A and 1B)**



Here are some examples of what you will be able to add to the form when you require demographic information to appear on your form.

Fig. 1A



Here is what it will look like after you publish and use the form for a client. When you use the published form the placeholders are replaced with client first and last name, date of birth, address and phone number pulled from client intake.

Fig. 1B

Eme	ergency Contac	st and medical in	normation for a Child
		Date Form Created	05/15/2015
Childs Information:	Male Female		
First Name: Joey Last	Name: Smith <u>DOB:</u> 06/04/2000		
Address: 42 West Street			
City: Omaha State: NE	Zip Code <mark>: 68130</mark>		
Phone: (402) 345-3333			

Date Location of service Referral Reasons Referral Source Service Requested User

Fig. 2A

Client Data Collection Sheet

Client	Name: Alan Able			
User:	Ron Admin	Select	Date Created:	09/12/2019
Refer	ral Source Address:			
(AWF) Abacus 82 Sou Allan	Abacus Whole Family Family Service th 6th Street Town , NJ 68934	Select		
Referral	Reason: Doctor referred	Select		
Service	Requested: Clinical Evaluati	ion Select		
Locati	on of Service: (AOBH)	Orion Behavioral I Sele	ect	
Admit D	ate with assigned Level of Ca	are: 7/4/2019 - (Level II.	1 - Inte Select	

Fig. 3A

	<u>Cli</u>	ent Data Collection Sheet	
Client Name: Alan A	ble		
User: Ron Admin	Select	Date Created: 09/12/2019	
Referral Source / Se	rvice		
(AWF) Abacus W ole Abacus Famil: Serv 82 South 6t Stree Allan Tov, NJ 68 Referr Reason: Docto Service Requested: Clin	Clinical Evaluation Halfway House npatient Care Dutpatient Care		*
Location of Servic			-
Admit Date with assign		Use Close	



Third Line – [Font & Font Size] will give a list of five different fonts along with the ability to change the font size.



Next to the Insert Merge Fields you will see the standard Toolbar you would find in most word processing programs.





This Toolbar will come in handy when you need to Cut, Copy, and Paste as well change the font to bold or Italic with an underline. Here are some shortcut key commands you can use as well: 1) Crtl + X = Cut 2) Crtl + C = Copy 3) Crtl + V = Paste

On the third line after the font and font size, you will find another Toolbar to help you create your form. You do not need all of these items to create your form but we have included them to assist you with creating a new form.



Overview of Third Line in Toolbar



Area #1 - Alignment of Text



above







™ ±

§ 0

ΣØ

+ +

∞ ¼



Number List allows you to create a numbered list.

Alcohol and Drug Use Data Tab

Drug Problem: Enter 1 AND 2 to Select for Primary Drug (1) and

- 1. Type in Number List
- 2. Type in Number List
- 3. Type in Number List



Insert Symbol – you have the ability to add symbols to your typed statements or instructions.

Drug Problem: Enter 1 AND 2		Ω) A	•		•	•
		€	£	¥	Ħ	©	®
	1	≠	×	≤	≥	÷	×
€ ¾ Ø ©		1∕4	3/4	2	3	‰	1
		β	α		Δ	μ	Ω
		2	٥	œ	30		•
		f	0∃ TF	Ÿ			
	L						



Foreground Color allows you to change colors on your form to help emphasize key points.



Alcohol and Drug Use Data Tab

Drug Problem: Enter 1 AND 2 to Select for Primary Drug (1) and Secondary Drug (2) of Choice (Code)



Area #3 – <u>Insert Line Spacing</u>, <u>Tables and Form Elements</u>

Line spacing allows you to highlight an area then set the spa	acing.
On the Insert tab, the galleries include items that are designed to coordinate with the ove galleries to insert tables, headers, footers, lists, cover pages, and other document buildin diagrams, they also coordinate with your current document look. On the Insert tab, the galleries include items that are designed to coordinate with the ove galleries to insert tables, headers, footers, lists, cover pages, and other document buildin diagrams, they also coordinate with your current document look.	rall look of your document. You can use these ng blocks. When you create pictures, charts, o rall look of your document. You can use these ng blocks. When you create pictures, charts, o
Inserting Tables allows you to create a table in your form. When you open the Table icon select the number of rows and columns to create your grid. In this example, I chose a 3 X 8 blocked grid.	Table Wizard





Insert Form Elements icon allows you to add check boxes, radio buttons, selection boxes, text boxes and text areas to your form.

Instructions:

When you select **Insert Checkbox** your given the checkbox properties dialog box.

a. Click the radio button for New Group to create a group name for a

list of disabilities. This will be our first one.

b. Decide what text you want to be displayed next the checkbox.

c. Give each checkbox a DB value (for example, I am using DCB1 since I plan to create a couple of check boxes for this group)

📰 Checkbox Proper	ties 🛛 🗙
Existing Group:	~
New Group:	DisableCheckBoxes
Display Text:	None
DB Value:	DCB1
S	Cancel

Disability / Disabilities (select all that apply)
None

d. For the next entry I selected **Existing Group** to add the next item to my list and I want to keep everything within the same group.

🖃 C	E Checkbox Properties		
۲	Existing Group:	DisableCheckBox 🔻	
	New Group:		
	Display Text:	Visual	
	DB Value:	DCB2	
	S	ave Cancel	

(Disability / Disabilities (select all that apply)
	■ None ■ Visual





e. Let's do one more so you can see the pattern.

Existing Group: DisableCheckBox New Group: Visual	E Checkbox Properties	×	Disability / Disabilities (select all that apply)
Display Text: Hearing DB Value: DCB3 Save Cancel	 Existing Group: DisableCheckE New Group: Display Text: Hearing DB Value: DCB3 Save Cancel 	x •	 None Visual Hearing

When I have completed creating my checkbox list it should look something like this:

Disability / Disabilities (select all that apply) None Visual Hearing Speech Mobility Mental

After publishing your form you will able to use the checkboxes:

Disability / Disabilities (select all that apply)	
None None	
✓ Visual	
Hearing	
Speech	
Mobility	
Mental	





Insert Form Elements allows you to add check boxes, radio buttons, selection boxes, text boxes and text areas to your form.

Instructions:

When you select **Insert Radio** your given the Radio Properties dialog box.

a. Click the radio box for **New Group** since we are creating a decision type of response.

b. Decide what type of decision you would like to ask that requires an either / or type of decision.

Radio Properties	x
Existing Group:	•
New Group:	AgreeDisagree
Display Text:	Not Sure
DB Value:	Not Sure
Is Default:	
	Save



-	
V	Insert Checkbox
۲	Insert Radio
	Insert Select
ab	Insert Textbox
ab cd	Insert Text Area

For example I need to know if the person being asked the following question agrees, disagrees or not sure

In your opinion - Do you agree or disagree with this statement:

Client's should be given the choice of inpatient treatment when admitted for treatment by their doctor?



Module Name: Custom Form Builder and Publishing Guide

Radio Properties	×
Existing Group:	AgreeDisagree 🔻
New Group:	
Display Text:	Disagree
DB Value:	Disagree
Is Default:	
S	Save Cancel

Once you have created the text and DB Value for each radio button, it should look similar to the example below.

In your opinion - Do you agree or disagree with this statement:

Client's should be given the choice of inpatient treatment when admitted for treatment by their doctor?

Not Sure
 Agree
 Disagree



Insert Form Elements allows you to add check boxes, radio buttons, selection boxes, text boxes and text areas to your form.

Instructions:

When you select **Insert Select** your given the Insert Select dialog box. This dialog box allows you create a picklist of choices.





Under Add/Remove Options: Use the + sign to create your pick list	Under Properties: Create Field Name, Type in a Width, Height and Size. Decide if you will allow multiple or one choice.
Add/Remove Options Add/Remove Options Options: Display Text: DB Value:	Properties Field Name: Width: pixels Height: pixels Size: Multiple: OK Cancel



Follow this three steps process when creating your pick list using the Insert Select.





Step #3

Now go back to Add / Remove Options and change each option you created with the Text you would like to see on the pick list. You can also change the DB Value to give it more meaning.

Add/Remove Opt	ions	Properties
÷ -		Field Name: PhysicalExam
Options:		Width: 100 ¢ pixels
Head		Height: 100 🗘 pixels
Eyes		Size: 100
Ears		Multiple:
Nose		
Throat		
Display Text:	DB Value:	
TI 1	Throat	

Here is what it looks like right after I created the pick list.

Note: Above the pick list I typed in 'Physical Exam- What areas need to be checked'

Physical Exa	am - V	Vhat areas	need to b	e checked	I	
Head Eyes Ears Nose Throat	^ _					
ļ						



Insert Form Elements allows you to add check boxes, radio buttons, selection boxes, text boxes and text areas to your form. Instructions: When you select Insert Textboxt your given the Insert Textbox Properties dialog box.

In this example:

1) I created a DB Name of Question1. 2) Then I pasted the following statement for Default Value - Number of days in the past 30 days that the client has used alcohol?

3) I tried using the default number of pixels of 200 but found it would cut off some of my text so tried 400 pixels. You will need play around with this to ensure everything fits.

(Note: there is a limit of 900 to 1000 pixels. It will run off the screen so you are liimited to around 900 to 1000 pixels. I would suggest using the Insert Text Area option if you need more space for a response.)

Textbox Properties				
DB Name:	Question1			
Default Value:	Number of days in the past 3			
Width:	400 pixels			
	Save Cancel			

What is looks like after creating the text box:

Number of days in the past 30 days that the client has used alcohol?



Γ	•	
k	V	Insert Checkbox
5	۲	Insert Radio
	F	Insert Select
	ab	Insert Textbox
	ab cd	Insert Text Area



Instructions:

When you select **Insert Text Area** your given the Insert Text Area properties dialog box.

-	
	Insert Checkbox
۲	Insert Radio
	Insert Select
ab	Insert Textbox
ab cd	Insert Text Area

In this example:

1) I created a DB Name of **Statement1**.

2) Then I pasted a saved statement with a couple of lines from a text file.

3) I tried using the default number of pixels of 200 for both width and height but found it to cut off some of my text so I tried 300 pixels width and 250 pixels height. You will need play around with this to ensure everything fits.

Text Area Properties						
DB Name:	Statement1					
Default Value:	*** This is just a example stat					
Width:	300 pixels					
Height:	250 pixels					
	Save Cancel					

*** This is just a example statement to show you how the Insert Text Area option works *** You can easily change the formatting of selected text in the document text by choosing a look for the selected text from the Quick Styles gallery on the Home tab. You can also format text directly by using the other controls on the Home tab. Most controls offer a choice of using the look from the current theme or using a format that you specify directly. *** This is just a example statement to show you how the Insert Text Area option works ***	Here is screen shot of the pasted text in a Text Area box						
	*** This is just a example statement to show you how the Insert Text Area option works *** You can easily change the formatting of selected text in the document text by choosing a look for the selected text from the Quick Styles gallery on the Home tab. You can also format text directly by using the other controls on the Home tab. Most controls offer a choice of using the look from the current theme or using a format that you specify directly. *** This is just a example statement to show you how the Insert Text Area option works ***						



Using Published Forms

Once a form has been created and published forms can be open by clicking this Icon								
	Ing System	Intake ASI A	dm/Dis Diagnosis Scheduler	Notes Rec Suprt Screeni	ng Chart Forms	Welcome, Ron Adm	in 💡 g Out 🕞	
7		Care ng System				\$		
	Main	Admission/Discharge	Diagnosis	Other Tools	المعرفين الم Recovery Support	Follow Ups		
	Scheduler	Billing	Client Chart	Prevention	Session Logs	User Setup		
	- Clinical		F	Reports	€ = ¢			
	Screening	Assessments Progress Notes	Patient Placement	Manager Reports	Data Analysis	Data Query		
						Log Out		



To pull up a first select a	published custom f client.	orm you must				
ACCOCATE Biol-based Plastic Management System						
le > Custom Forms						
earch by:	Last Name		Name	SSN	Client Reference #	
egins with or matches:			Smith, Jennifer			
	Search Display All	-	Smith, Joey			
			Smith, John J.			
Date		Form Name		Select		
	Add Edit	Delete Preview Prin	t File and Sign Ex	xport to Excel	Close	
	Next – Click	on the [Add] button	7			







Here is a screen shot of the form prior to filling in the information:

File > Custom Forms							
Form Date: 05/29/2015							
Emergency Contact and Medical Information for a Child							
Childs Information: Image: Male Female Child's First Name; Joey Last Name; Smith DOB; 06/04/2000 Address: 42 West Street City: Omaha State: NE Zip Code: 68130 (402) 345-3333 Code: 68130 City: City							
Alternative Emergency Contacts:							
Primary Emergency Contact Secondary Emergency Contact							
Home Phone Home Work Phone Work Phone							
Address Address							
Medical Information:							
Hospital/Clinic Preference							
Physicians Name: Phone Number							
Insurance Company							
Allergies/Special Health Considerations:							
I authorize all medical and surgical treatment, X-ray, laboratory, anesthesia, and other medical and/or hospital procedures as may be performed or prescribed by the attending physician and/or paramedics for my child and waive my right to informed consent of treatment. This waiver applies only in the event that neither parent/guardian can be reached in the case of an emergency.							
i give permission for my child to go on field trips. I release							
as long as normal safety procedures have been taken.							
Parents / Guardian's Type in Name							
Parents / Guardian's Signature							
Save Cancel							



Here is a screen shot of the form after filling in the information:

> Custom Forms	
orm Date: 05/29/2015	
Emergency Contact and Medical Information for a Child	
Date Form Created 05/29/2015	
Childs Information: 🖉 Male 🔲 Female	
Child's First Name: Joey Last Name: Smith DOB: 0504/2000	
Address: 42 West Street	
(402) 345-3333	
Alternative Emergency Contacts:	
Primary Emergency Contact Jacob Smith Secondary Emergency Contact Janet Smith	
Home Phone 402-345-3433 Home Phone same	
Work Phone 402-567-7890 Work Phone 402-890-7892	
Same address as child	
Address Address	
AUU1999	
Medical Information:	
Hospital/Clinic Preference Hope Child Clinic	
Physicians Name: Dr. Martin Perterson Phone Number 402-272-1289	
Insurance Company Lake Shore Insurance Policy Number POL-3433-AA-1994	
Penicillin	
Allergies/Special Health Considerations:	
I authorize all medical and surgical treatment, X-ray, laboratory, anesthesia, and other medical and/or hospital procedures as may be performed or prescribed by the attending physician and/or paramedics for my child and waive my right to informed consent of treatment. This waiver applies only in the event that neither parentiguardian can	
be reached in the case of an emergency.	
I give permission for my child to go on field trips. I release and individuals from Ilability in case of accident during activities activate to activ	
Parents / Guardian's Type In Name Lanet Smith Date: 05/20/2015	
A DECEMBER OF DECEMBER	
Descarde / Outstellande Standaum	
Parenis / Guardian's Signature	
	Once the form has
	been filled out click on
	the [Save] button. You
	can always come back
V	to this form to edit.
Const.	
aave cancel	



Whenever you look up a client in Custom Forms, you will be able to see all the forms created for that client.

ile > Custom Forms					
Search by:	Last Name 🔹		Name	SSN	Client Reference #
Begins with or matches:			Smith, Joey		
	Search Display All				
Date		Form Name		Select	
05/29/2015		Emergency Contact and	Medical Information for	a 🖉	
	Add Edit	Delete Preview Pri	nt File and Sign	Export to Excel Close	
dd] button – Br published form	ings up a list s.				[Close] button – close the Custom Forms Module.
dd] button – Br published form [Edit] button to go back to to make chan	ings up a list s. – Allows the user the fillable form ges.			[Expo will a the in select	[Close] button – close the Custom Forms Module. ort to Excel] button – llow you to pull all nputted data from a ted form.
(Edit) button – Br published form [Edit] button to go back to to make chan [Delete] form ca user mu security task.	ings up a list s. - Allows the user the fillable form ges.] button – The select n be deleted but the ust have the proper r level to perform the	ted e is		[Expo will a the in select [File and Si of the form allows you document	[Close] button – close the Custom Forms Module. ort to Excel] button – llow you to pull all nputted data from a ted form. gn] button – will send a d to Chart Management a and the client to sign the electronically.

Tips & Considerations

Tips & Considerations for the Custom Form Builder

• When inserting a form element please keep in mind that inserting checkboxes is best utilized when you have an answer that can have multiple selections. If your answer to the question should only have one selection made then it is best to insert radio buttons.



• When creating multiple selections (radio and/or checkboxes) that are given for a specific question it is best to create a grouping for each set of either radio or checkboxes and to tie each radio or checkbox to that same group when creating the button.

🗐 Checkbox P	roperties 🔀
Existing G	roup: NewGroup 🔻
New Grou	ıp:
Display Te	ext:
DB Value:	
	Save Cancel



• It is important to create a proper DB value when creating form elements as this will tie into the 'Export to Excel' feature once the form is published and has been completed for a given client. Be as specific as possible when naming your DB values as it pertains to the given question or answers available for selection. Being specific with each form element created will in turn make your output to excel easy to read and understand after a form has been added for a given client.

Checkbox Properties								
•	Existing Group: New Group:	NewGroup 🔻						
	Display Text:	Income from Employment						
DB Value: IncomeFromEmployment Save Cancel								

- Please keep in mind that you cannot completely copy and paste a completed form from a PDF or Word document into the Custom Form Builder. The form must be recreated utilizing the tools provided in the Custom Form Builder. Form Builder. Form elements created in other applications WILL NOT carry over into the Custom Form Builder.
- Please keep in mind that once you publish a form within the Custom Forms Builder that you CANNOT delete or edit that form.



• Archiving a published form will remove the form for available selection when selecting the 'Add' button under the 'Custom Forms' module for any given client.

File > Custom Forms									
Search by:	Last Name	•			Name	SSN		Client Reference #	
Begins with or matches:	Search Displa	ay All			Barker, Bob Test, Jack				-
					Thumb, Tom				-
Date		F	orm Name			Select			
05/19/2015		a	issessment						
	Add	Edit Del	ete Preview	Print	File and Sign	Export to Excel	Close		

• If you must make edits to a published form within the Custom Forms Builder it is best to first select the published form and then select 'Create Copy'. Then you would provide the new form with a new name and make your necessary edits to the form and once completed/reviewed you could publish that form. You would then want to archive the old, published form.

	T							
etup > Custom Form Builder								
Name			Created By		Last Modified	Publishe	d Archived	Select
Administrative Discharge			Dylan Lamb	recht	06/01/2015	No	No	
another assesment			Staff		05/19/2015	Yes	Yes	
another assessment			Staff		05/19/2015	No	No	
assessment			Staff		05/19/2015	Yes	No	
Assessment updated 5/19/2015			Staff		05/19/2015	Yes	No	V
eval			Staff		05/28/2015	No	No	
Evaluation			Staff		06/01/2015	No	No	
Hope Administrative Discharge			Ron Alai		06/01/2015	No	No	
Hope Annual Update			Ron Alai		06/01/2015	No	No	
new assessment			Staff		05/19/2015	Yes	No	
Test			Ron Alai		06/01/2015	Yes	No	
Test 3			Ron Alai		06/01/2015	No	No	
Test2			Ron Alai		06/01/2015	Yes	No	
Add Edit	Create Copy	Delete	Demo Form	Preview Report	Publish	Archive	Close	

Create Copy								
You are about to create a copy of an existing form. Please enter a name for the new form. The new name must be unique.								
Existing Form Name:	Assessment updated 5/19/2015							
New Form Name:	Assessment updated 6/2/2015							
	OK Cancel							



• It is best practice to first select 'Demo Form' and 'Preview Report' within the Custom Form Builder prior to publishing the form. This will ensure all questions/answers are aligned properly prior to publishing the form.

AccuCare				
Web Assed Partice Management System				
Setup > Custom Form Builder				
Form Name: Hope Administrative Discharge				
Insert Merge Fields 🔹 🍤 💌 🖓 🖬	B Z U			
Font 🔹 Font Size 🔹 🚍	= 		= Ω · A · Ξ · 🔳 ·	•
##LastName####FirstName##				
Program ID		لے _		
Discharge Tab				
Date of Birth:				
Date of Discharge:	}			E
Discharge Time:	AM	<u>/</u>		
Type of Discharge: Reason Not Avai	lable			
RadioButton				
	Tutorial Demo Form	Preview Report	Save Cancel	



• When inserting a select box from within the form element menu it is important that when adding options for the select box to make sure the display text and DB value are the same or similar in verbiage. This way when the form is published the available selection when selected will match up with the database value that is displayed on the export to excel for that form.

-Add/Remove Opti	ons	Field Name: PhysicalExam
Options: Head Eyes Ears Nose Throat	Display Text: Head DB Value: Head	Width: 100 ¢ pixels Height: 100 ¢ pixels Size: 100 Multiple:

• When creating a select box from within the form element menu it is important to remember that you must provide a Field Name (spaces are not allowed), width, height, and size. For example, if you created a select box with 4 available options it would be best to size the select box as:

Width: 100 pixels

Height: 100 pixels

Size: 100



• When creating radio buttons that belongs to the same 'Group' it is important to keep in mind that one of the radio button values must be set as the default. This way once the form is published one of the radio button values will automatically be selected.

🗐 Radio Properties	X
 Existing Group: New Group: Display Text: DB Value: Is Default: 	Not SureNot Sure



When inserting a table within the Custom Form Builder it is important to keep in mind that each cell will automatically be adjusted once you start typing within the cell. The table's horizontal length will automatically adjust itself. <u>IMPORTANT</u>: please keep in mind that if the table body extends horizontally past the printable area that you will be unable to save the form and thus must remove content from the non-printable region prior to saving. Below is an illustration showing a textbox that extends past the printable region of the form and cannot be saved:

Setup > Custom Form Builder	
Form Details	
Form Name: Hope Annual Update	
Insert Merge Fields 🔹 🥙 🔹 🥲 🐇 📳 🔒 🛛 🛛	
"Arial" → 16px → 트 Ξ Ξ Ξ 2 ¶+ 年 3	
that the client has used alcohol?	
the rks e the t in ing a from T the	
Tutorial Demo Form	Preview Report Save Cancel



 If you ever make a mistake and accidentally delete text or form elements or make any immediate changes that you did not intend you then have the option to select the 'Undo' button the revert the last changes you made within the form.

AccuCare					
Setup > Custom Form Builder					
Form Details					
Form Name: Hope Annual Update					
		7 11			
	B			0	
Arial Topx TEE		≇ 1+ ‡	1 -	Ω^{+}	
Throat					*
-					
d					
Number of days in the past 30 days that the c	lient has us	ed alcohol?			
	,				
*** This is just a example statement to show you how the					=
Insert Text Area option works					
formatting of selected text in					
the document text by choosing a look for the selected text from	=				_
the Owigh Stules gellery on the					
	Tutorial	Demo Form	Preview Report	Save	Cancel



• Inserting Merge Fields will automatically merge specific data pulled from 'Client Intake' into the form that is tied to a specific client. Keep in mind, that if a merge field does not display data for a specific client then that is most likely due to the fact that this data was not originally enter into 'Client Intake' for that specific client.

Setur > Custom Form Builder	
Form Name Hope Annual Update	
Insert Merge Fields 🔹 🧐 👻 🥲 😤 📴 😤 🖪 🗾	
"Arial" - 16px - Ε Ξ Ξ Ξ Ζ ¶+ ≇ Ξ Ξ Ξ Ξ Ξ Λ - Α - Ξ - Ξ - Ξ -	
Nose Throat	*
d Number of days in the past 30 days that the client has used alcohol?	-
	-
**** This is just a example statement to show you how the Insert Text Area option works *** You can easily change the formatting of selected text in the document text by choosing a look for the selected text from	4 III
the Oviet Stules seller on the III	•
Tutorial Demo Form Preview Report Save Cancel	

• If you are unable to remove a form element that was accidentally created then you may need to select the 'Undo' button to put your form back in a previous state.



Tips & Considerations for Custom Forms (non-administrative side of the house)

• Please keep in mind when exporting form data to excel that you must first select a form and then select a date range for data that you would like to view. This export will show you data for ALL clients that have completed said custom form.

AccuCare										
File > Custom Forms										
The > Custom Forms										
Search by:	Last Name						Name	SSN		Client Reference #
Begins with or matches:							Barker, Bob			
	Search	Displa	y All							
Date				Form	Name			Select		
05/19/2015				assess	ment					
								•		
		Add	Edit	Delete	Preview	Print	File and Sign	Export to Excel	Close	

Export Form Data to Excel	
Form Type: Assessment updated 5/19/2015	
From 05/01/2015 III to 05/31/2015	
Export Close	



• Administrators whom need access to create and publish custom forms must first have the following value set to 'Allowed Areas' within the 'Customized' tab for said user profile:

ACCUCATE Bitchased Parkir Management Syster				
p > User Administrat	ion			
er By:	e 💿 User ID		Select a User: Dylan Lambrecht	
General Custo	omized IHS NDW	Electronic Signature		
	Denied Areas		Allowed Areas	
		>> <<	Setup -> Agencies Setup -> Authorization Sup -> Client Categories Setup -> Custom Form Builder Setup -> Group Setup Setup -> Lists of Values Setup -> Manage Permissions Setup -> Outcome Research -> Follow-up Setup Setup -> Outcome Research -> TSR Setup	A III

Setup -> Custom Form Builder



• Clinicians or counselors whom need access to add a published form to a specific client in the database must first have the following value set to 'Allowed Areas' within the 'Customized' tab for said user profile:

Cust	tom Form	S							
-	Accu	Care							
	A MORE NO INCIDENTIAL	Change 2 March	_						
Setu	up > User Ad	ministration							
Or	der By: 💿 U	lser Name 💿 User	ID				Select a User:	Dylan Lambrecht	-
	General	Customized	IHS NDW	Electro	onic Signature				
		Denied A	Areas			Bulund -	Allowed A	reas	
						Billing -	> Standard Reports > Transaction Register		^
						Chart M	anagement		
						Clent In	itake		E
					>>	Cl ent R	eports		
					<<	Clinical	Forms		
						Custom	Forms		
						Data Qu	ery		
						Delete C	lients		
						Delete G	iroups		-
			Add Edit	Save	Cancel	Delete	Print Close		