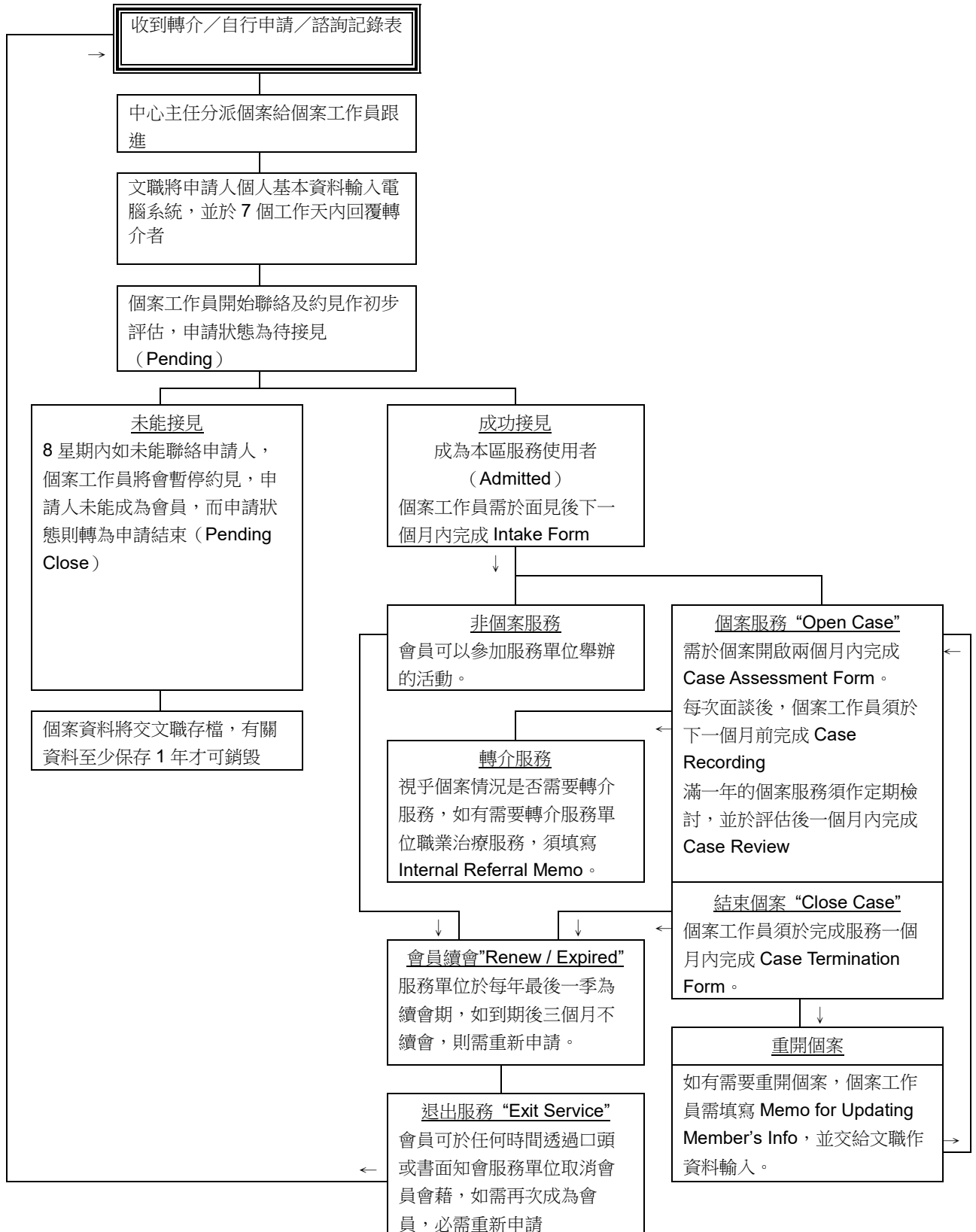


## 1. Background of existing BOKSS Case Library System

### 1.1 Logic



## 1.2 Workflows

- i. After receiving applications directly from potential clients or referrals from other organizations, our administrative staff (by district) will create a "Referral / Intake" e-form and enter client's information. The membership status is "Pending".
- ii. BOKSS In-charge (managerial staff, IC) will review the pending case and assign it to a Social Worker (Worker). The Worker will then contact the client and input further details (e.g. needs and problems) in the client's "Referral / Intake" form. Besides, the Worker will create a "Case Recording" e-form to record the content of interview.
- iii. If the client is suitable for Integrated Community Centre for Mental Wellness (ICCMW) service after intake interview, his/her membership status will be changed to "Admitted" and a membership number will be assigned. If the client rejects the service or is untraceable, the client's status will be changed to "Pending Close".
- iv. Once the client became ICCMW member, the Worker will open the case and create "Case Assessment" e-form showing the "Case Open Date". The Worker shall keep updating the client's "Case Recording" e-form whenever any case interview has been done.
- v. The Worker will review the case annually (if needed) and create a "Case Review" e-form. If the case needs to be closed, the Worker will create a "Case Termination" e-form showing "Date of Closed case".

## 1.3 Monthly Reporting

- Based on all case information obtained in the last month, our administrative staff will prepare a monthly statistical report (please refer to appendix section) and submit it to the Social Welfare Department.
- The Worker will print out all cases in the last month and file these hard copies.

**Remark: For (a), The Worker will use a form "Case Recording" to keep track of all conversations with the client at following status -**

**Membership status: Pending, Admitted (excluded from Expired / Exit service member)**

**Case Status: "Open Case" or after "Case Termination"(which is existing member)**

## 2. New BOKSS Case Library

- A detailed user requirements are listed as below:

### 2.1 Case Recording Module

- The Module shall build and amend the existing form into the System.
- The Module shall build and amend the existing logic into the System.
- The Module shall build a new e-form into the System.
- The Module shall build new features including but not limited to the following:
  - ◆ Enhance the search and create record function (e.g. existing client name handling for duplicate check).
  - ◆ If the Worker received a referral case who is an existing client (i.e. open case), the System only need to add the record into the existing case.
  - ◆ Import and export data function.
  - ◆ Enquiry for client activities by user access right.
  - ◆ Add summary page of client status.
  - ◆ For annual review of cases (start date from date of open case), the Module shall alert the related Worker to contact the client and create or update the “Case Review” e-form until the case closed.
  - ◆ The Module shall provide alert function to the Worker when the case has been opened more than 8 weeks without any updates.
  - ◆ The Module shall provide “Re-open Case” handling in the System.
    - When the main Case Worker was not found (e.g. resigned) in the System, the appointment module shall allow the client to make a request for following up his/her case by another Worker.
  - ◆ The Module shall provide auto save function when filling out the e-forms.
  - ◆ If a new client would like to use online professional support service, the System shall only display any DO’s roster for the client to make an appointment through the System.

### 2.2 Case Management Module

- The Module shall leverage the CMS user profile to control the case library data access rights.
- The Module shall enhance the privilege setting (e.g. create & approve, user right, district access etc.).
- When the Worker creates Intake / Case Assessment / Case Review / Case Termination form, the Module shall display approval procedure.

- The Module shall provide “Re-assign case” function to the IC and the Worker.
  - ◆ The Module shall update case worker information (e.g. Worker ID, handling date) in the case record when there is any change in personnel.
- The Module shall allow other professional staff to access the System (based on their privilege) and follow up the case with the Worker.
  - ◆ The other professional staff shall access the System and use a new e-form to capture the client information from the System.
  - ◆ The case count will be saved into the statistical report.
- Enhance the search function

### 2.3 Reporting

- The Module shall build the existing report into the system.
  - ◆ For the statistical report, the Module shall count all cases into the report.
    - At month-end, administrative staff has once confirmed and printed out the report, the related statistical data will be frozen; amendment and reprinting of reports can be made by authorized staff.
    - If there is any change in case number, the Module shall provide a re-calculate function for generating a revised statistical report and the old data will be overwritten in the System.
- The Module shall build new reports including but not limited to the following:
  - ◆ Audit trail report
  - ◆ Client summary / detail report by Worker and IC.
  - ◆ New analysis report
  - ◆ Instead of submitting hard copies, XML statistical files will be created and uploaded to the Social Welfare Department (details will be provided later).

### 2.4 Data Conversion

- The Service Provider shall provide programs to migrate all records in the existing case library (about 150,000 records) into Re:Fresh e-Platform (CMS) System.
- Only active data will be migrated to the new System.

- END -

Appendix:

Database: The existing case library is using MS-Access to store the data.

Existing Form Menu (For reference only)



Admitted

Admitted |

Existing Form : Referral / Intake

Existing Form : Case Assessments



Case Assessments (OT)

Admitted	
ID:	4
Name (English):	Membership No:
Referral Date:	Name (Chinese):
Intake worker:	Admitted Date:
Responsible Workers:	Assigned Worker:
<input type="button" value="Update"/> <input type="button" value="Print"/> <input type="button" value="Word"/> <input type="button" value="Excel"/> <input type="button" value="Delete"/> <input type="button" value="top"/> <input type="button" value="Back"/>	
Case Assessments (OT)	
Work History 1 (Post):	Work History 1 (Duration):
Work History 1 (Reason):	
Work History 2 (Post):	Work History 2 (Duration):
Work History 2 (Reason):	
Work History 3 (Post):	Work History 3 (Duration):
Work History 3 (Reason):	
Remarks:	
Recommendation:	<input type="button" value="🔍"/>
Fit for admission:	<input type="checkbox"/> Individual Training <input type="checkbox"/> Group Training <input type="checkbox"/> Individual & Group training
Reason for Recommendation:	<input type="button" value="🔍"/>
<input type="button" value="Update"/> <input type="button" value="Print"/> <input type="button" value="Word"/> <input type="button" value="Excel"/> <input type="button" value="Delete"/> <input type="button" value="top"/> <input type="button" value="Back"/>	
Basic Needs Assessments	
Personal Hygiene (Reported):	Personal Hygiene (Observed):
Dressing (Reported):	Dressing (Observed):
Daily Routine (Reported):	Daily Routine (Observed):
Self-care - Other:	Self-care - Other (Reported):
Self-care - Other (Observed):	
Self-care (Supplementary Information):	
Cooking (Reported):	Cooking (Observed):
Cleaning (Reported):	Cleaning (Observed):
Home Safety (Reported):	Home Safety (Observed):
Home Management - Other:	Home Management - Other (Reported):
Home Management - Other (Observed):	Home Management (Supplementary Information):
Drug Management (Reported):	Drug Management (Observed):
Illness Management (Reported):	Illness Management (Observed):
Physical Health Management (Reported):	Physical Health Management (Observed):
Health Management - Other:	Health Management - Other (Reported):
Health Management - Other (Observed):	
Health Management (Supplementary Information):	
Money Management (Reported):	Money Management (Observed):
Transportation (Reported):	Transportation (Observed):
Using Community Resources (Reported):	Using Community Resources:
Interest exploration (Reported):	Interest exploration (Observed):
Community Living - Other:	Community Living - Other (Reported):
Community Living - Other (Observed):	
Community Living (Supplementary Information):	
Work:	Work Goal (Reported):
Work Goal (Observed):	Motivation (Reported):
Motivation (Observed):	Work - Others:
Work - Others (Reported):	Work - Others (Observed):
Work (Supplementary Information):	
With Family (Reported):	With Family (Observed):
With Friends (Reported):	With Friends (Observed):
Interpersonal Relationship - Others:	Interpersonal Relationship - Others (Reported):
Interpersonal Relationship - Others (Observed):	Interpersonal Relationship (Supplementary Information):
Memory (Reported):	Memory (Observed):
Attention (Reported):	Attention (Observed):
Problem Solving (Reported):	Problem Solving (Observed):
Cognitive Function - Others:	Cognitive Function - Others (Reported):
Cognitive Function - Others (Observed):	
Cognitive Function (Supplementary Information):	
<input type="button" value="Update"/> <input type="button" value="Print"/> <input type="button" value="Word"/> <input type="button" value="Excel"/> <input type="button" value="Delete"/> <input type="button" value="top"/> <input type="button" value="Back"/>	

**Case Recording**

Admitted	
ID: 4	Membership No:
Name (English):	Name (Chinese):
Referral Date:	Admitted Date:
Intake worker:	Assigned Worker:
Responsible Workers:	
<input type="button" value="Update"/> <input type="button" value="Print"/> <input type="button" value="Word"/> <input type="button" value="Excel"/> <input type="button" value="Delete"/> <input type="button" value="Top"/> <input type="button" value="Back"/>	
Case Recording	
Date:	Time:
Venue:	Nature of Contact:
Objectives:	
Summary of Content:	
Worker's Assessment:	
Plan or Action:	
Staff Name:	Recording Type:
No. of last records be added or deleted: 1 <input type="button" value="New Record"/> <input type="button" value="Delete Record"/>	
<input type="button" value="Update"/> <input type="button" value="Print"/> <input type="button" value="Word"/> <input type="button" value="Excel"/> <input type="button" value="Delete"/> <input type="button" value="Top"/> <input type="button" value="Back"/>	

Existing Form : Case Recording (OT)

**Case Recording (OT)**

Admitted	
ID: 4	Membership No:
Name (English):	Name (Chinese):
Referral Date:	Admitted Date:
Intake worker:	Assigned Worker:
Responsible Workers:	
<input type="button" value="Update"/> <input type="button" value="Word"/> <input type="button" value="Excel"/> <input type="button" value="Print"/> <input type="button" value="Delete"/> <input type="button" value="Top"/> <input type="button" value="Back"/>	
Case Recording (OT)	
Mode of Service:	Mode of Service (Others):
Date of Recording:	No of Training Sessions:
Objectives:	
<input type="checkbox"/> Hygiene <input type="checkbox"/> Cooking <input type="checkbox"/> Home safety <input type="checkbox"/> Physical health Mx <input type="checkbox"/> Use of Transport <input type="checkbox"/> Work Attitude <input type="checkbox"/> Others	<input type="checkbox"/> Dressing <input type="checkbox"/> House Cleaning <input type="checkbox"/> Drug Mx <input type="checkbox"/> Cognitive <input type="checkbox"/> Community Resources <input type="checkbox"/> Motivation
	<input type="checkbox"/> Daily Routine <input type="checkbox"/> Home Tidying <input type="checkbox"/> Illness Mx <input type="checkbox"/> Money Mx <input type="checkbox"/> Leisure Management <input type="checkbox"/> Work Skills
Descriptions:	
Progress Summary / Evaluation:	
Problems Identification:	
Follow Up Plan:	
Case OT /OTA:	
No. of last records be added or deleted: 1 <input type="button" value="New Record"/> <input type="button" value="Delete Record"/>	
<input type="button" value="Update"/> <input type="button" value="Word"/> <input type="button" value="Excel"/> <input type="button" value="Print"/> <input type="button" value="Delete"/> <input type="button" value="Top"/> <input type="button" value="Back"/>	

Existing Form : Case Review

**Case Review**

Admitted	
ID: 4	Membership No:
Name (English):	Name (Chinese):
Referral Date:	Admitted Date:
Intake worker:	Assigned Worker:
Responsible Workers:	
<input type="button" value="Update"/> <input type="button" value="Print"/> <input type="button" value="Word"/> <input type="button" value="Excel"/> <input type="button" value="Delete"/> <input type="button" value="Top"/> <input type="button" value="Back"/>	
Case Review	
Period From:	Period To:
Case Analysis / Case Progress:	
Goals achieved:	
Need extension of casework, reason:	
Treatment Plan and Interventions:	
Remarks:	
Supervisor's recommendation:	
Date (Worker):	Date (Supervisor):
No. of last records be added or deleted: 1 <input type="button" value="New Record"/> <input type="button" value="Delete Record"/>	
<input type="button" value="Update"/> <input type="button" value="Print"/> <input type="button" value="Word"/> <input type="button" value="Excel"/> <input type="button" value="Delete"/> <input type="button" value="Top"/> <input type="button" value="Back"/>	

Existing Form : Case Termination



**Case Termination**

Admitted	
ID: 4	Membership No:
Name (English):	Name (Chinese):
Referral Date:	Admitted Date:
Intake worker:	Assigned Worker:
Responsible Workers:	
<input type="button" value="Update"/> <input type="button" value="Auto Count"/> <input type="button" value="Print"/> <input type="button" value="Word"/> <input type="button" value="Excel"/> <input type="button" value="Delete"/> <input type="button" value="Top"/> <input type="button" value="Back"/>	
Case Termination	
Date of Exit ICCMW:	Date of Closed Case:
Summary of present situation:	
Goals achieved:	
Reason for Termination / Recommendation:	
Referral to:	<input type="checkbox"/> Family Services <input type="checkbox"/> MSSU <input type="checkbox"/> CPT
Referral to (Others):	
Medical Treatment:	<input type="checkbox"/> Private Psychiatrist <input type="checkbox"/> Out patient clinic <input type="checkbox"/> Hospitalized
Medical Treatment (Others):	
Reason of Case Close:	
Reason of Case Close (Others):	
Discharge Status:	<input type="checkbox"/> Successful Discharge <input type="checkbox"/> Maintain stable employment / supported employment <input type="checkbox"/> Successfully seek psychiatric treatment <input type="checkbox"/> Unsuccessful Discharge <input type="checkbox"/> Self-withdrawn <input type="checkbox"/> The case has received casework service for a period of time, is mentally stable and functioning well & requiring no further casework intervention <input type="checkbox"/> Engage in meaningful activities <input type="checkbox"/> Take drugs regularly <input type="checkbox"/> Untraceable for 8 weeks or more <input type="checkbox"/> Hospitalized for over 3 months <input type="checkbox"/> Presenting Problem settled <input type="checkbox"/> Networked with other community resources <input type="checkbox"/> Admitted to subvented halfway house or long stay home <input type="checkbox"/> Rejected service/ unmotivated to receive service for at least 8 weeks
Discharge Status (Others):	
Date (Worker):	Date (Supervisor):
<input type="button" value="Update"/> <input type="button" value="Auto Count"/> <input type="button" value="Print"/> <input type="button" value="Word"/> <input type="button" value="Excel"/> <input type="button" value="Delete"/> <input type="button" value="Top"/> <input type="button" value="Back"/>	
Activities on the Case	
Individual Counseling:	Letters/ Referrals:
Family Counseling:	No of Groups:
Phone Contacts:	Consultations /Case Reviews:
Collateral Contacts:	Outreaching Visits:
Escorts:	Activities (Others):
<input type="button" value="Update"/> <input type="button" value="Auto Count"/> <input type="button" value="Print"/> <input type="button" value="Word"/> <input type="button" value="Excel"/> <input type="button" value="Delete"/> <input type="button" value="Top"/> <input type="button" value="Back"/>	

### Case Transfer

Admitted	
ID: 4	Membership No:
Name (English):	Name (Chinese):
Referral Date:	Admitted Date:
Intake worker:	Assigned Worker:
Responsible Workers:	
<input type="button" value="Update"/> <input type="button" value="Word"/> <input type="button" value="Excel"/> <input type="button" value="Print"/> <input type="button" value="Delete"/> <input type="button" value="Top"/> <input type="button" value="Back"/>	
Case Transfer	
From Worker:	To Worker:
Date of Transfer:	
No. of last records be added or deleted: <input type="text" value="1"/> <input type="button" value="New Record"/> <input type="button" value="Delete Record"/>	
<input type="button" value="Update"/> <input type="button" value="Word"/> <input type="button" value="Excel"/> <input type="button" value="Print"/> <input type="button" value="Delete"/> <input type="button" value="Top"/> <input type="button" value="Back"/>	

### Existing Form : Program Participation

### Program Participation

Admitted	
ID: 4	Membership No:
Name (English):	Name (Chinese):
Referral Date:	Admitted Date:
Intake worker:	Assigned Worker:
Responsible Workers:	
<input type="button" value="Update"/> <input type="button" value="Word"/> <input type="button" value="Excel"/> <input type="button" value="Print"/> <input type="button" value="Delete"/> <input type="button" value="Top"/> <input type="button" value="Back"/>	
Program Participation	
Date of Program participation:	Program code:
Program Name:	Care call:
No. of last records be added or deleted: <input type="text" value="1"/> <input type="button" value="New Record"/> <input type="button" value="Delete Record"/>	
<input type="button" value="Update"/> <input type="button" value="Word"/> <input type="button" value="Excel"/> <input type="button" value="Print"/> <input type="button" value="Delete"/> <input type="button" value="Top"/> <input type="button" value="Back"/>	

### Existing sample report

### Statistical Report

Statistical Report	
ID: 2	Serving District: Eastern
Period From: 1 Jun, 2014	Period To: 30 Jun, 2014
<input type="button" value="Update"/> <input type="button" value="Word"/> <input type="button" value="Excel"/> <input type="button" value="Print"/> <input type="button" value="Auto Count"/> <input type="button" value="Reopen"/> <input type="button" value="Delete"/> <input type="button" value="Top"/>	
(S) Enrolment	
No of New Members:	No of Renewed Members:
No of Outreaching Visits:	No of New Cases:
No of New Cases (Known Mental Condition):	No of New Cases (Suspected Mental Condition):
No of Re-activated Cases:	No of Closed Cases:
No of Closed Cases (Mentally Stable):	No of Closed Cases (HWH / LSCH):
No of Closed Cases (Psychiatric Hospital):	No of Closed Cases (Unmotivated):
No of Closed Cases (Self Withdrawal):	No of Closed Cases (Untraceable):
No of Closed Cases (Others):	
<input type="button" value="Update"/> <input type="button" value="Word"/> <input type="button" value="Excel"/> <input type="button" value="Print"/> <input type="button" value="Auto Count"/> <input type="button" value="Reopen"/> <input type="button" value="Delete"/> <input type="button" value="Top"/>	
(S) Referral	
MSSU (Psychiatric):	MSSU (General):
IFSC / ISC:	FCPSU:
Community support service for Elderly:	Other welfare units:
CPT of HA:	Personalized Care Program me of HA:
Allied health staff of HA:	Housing Department:
Government Department:	Legislative / District Councilor:
Other ICCMW:	Self Approach:
Family / carers:	BOKSS referrals:
Others referrals:	No of Cases Referred to CPT:
<input type="button" value="Update"/> <input type="button" value="Word"/> <input type="button" value="Excel"/> <input type="button" value="Print"/> <input type="button" value="Auto Count"/> <input type="button" value="Reopen"/> <input type="button" value="Delete"/> <input type="button" value="Top"/>	
(S) Profile of Members	
Age Below 15 (Male):	Age Below 15 (Female):
Age 15-29 (Male):	Age 15-29 (Female):
Age 30-59 (Male):	Age 30-59 (Female):
Age 60 & above (Male):	Age 60 & above (Female):
No of New Members (Known Mental Condition):	No of New Members (Suspected Mental Condition):
<input type="button" value="Update"/> <input type="button" value="Word"/> <input type="button" value="Excel"/> <input type="button" value="Print"/> <input type="button" value="Auto Count"/> <input type="button" value="Reopen"/> <input type="button" value="Delete"/> <input type="button" value="Top"/>	