
WinCare Add-Ons Key Features

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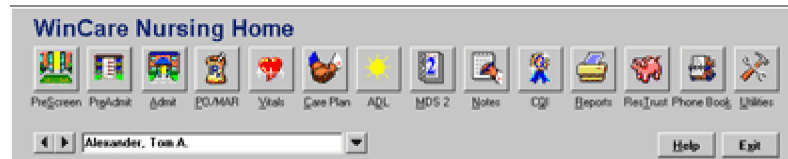
CHAPTER 1

Introduction

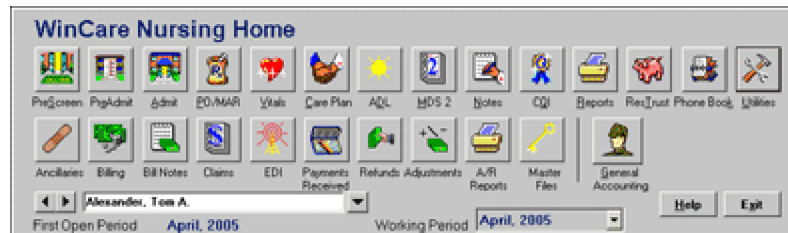
Use this book in conjunction with the downloaded trial version of WinCare to view key features and sample screenshots. The WinCare program opens with either the Clinical or Integrated Control Panel as displayed below depending on which version has been installed. Each module open with one click of the mouse.

In addition to the modules, the resident list and user guide can be accessed from the control panel. The Help button displays a menu which includes a user guide for all clinical, integrated (billing), add-on modules, system requirements, and release notes.

Clinical Control Panel:



Integrated Control Panel:



CHAPTER 2

Add-Ons

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Pre-Screen

Designed to enable Long Term Care facilities to quickly arrive at a cost of care for a potential Medicare resident prior to admission.

KEY FEATURES:

- § View the resident's level of care (Medicare RUGs score) without creating a full assessment
- § Preview reports prior to printing
- § Export residents to Pre-Admit module

The screenshot shows the 'Pre-Screening RUGs Calculator' window. It contains the following fields and controls:

- Patient Information:** Last Name (Carter), First Name (Maria), Middle Name (Jane), Social Security No. (334-48-4929).
- Sex:** Female (dropdown).
- Date of Birth:** 1 / 8 / 1916 (dropdown).
- Age:** 90 (text field).
- Insurance:** Medicare (radio button), Medicaid (radio button), Private (radio button), Veteran (radio button), Other (radio button).
- Primary Diagnosis:** 290.0 SENILE DEMENTIA UNCOMPLICATED (text field).
- Referral Source:** PACIFIC SOURCE (text field).
- Referral Phone Number:** 902392023 (text field).
- Primary Physician Last:** BROWN (text field).
- Physician First Name:** JOHN (text field).
- Careworker:** JAMES ERSKINE (text field).
- Hospital Admission Date:** Mar 15 2005 (text field).
- Medicare Days Used:** 0 (text field).
- Scheduled Admission Date:** (text field) with a checked checkbox for 'not set'.
- Completed By:** CJR (text field).
- Current Date:** 3 / 28 / 2005 (dropdown).
- Estimated Length of Stay (days):** 180 (text field).
- Notes:** MARIA NEEDS A CALL BACK BY APRIL 1ST 475-8789 (text area).

At the bottom right, there are 'Back', 'Exit', and 'Next' buttons.

Electronic Signature

This additional module enables users to securely sign MDS computer files

KEY FEATURES:

- § Users are authenticated to enable signing off individual MDS sections
- § Once a section is signed, it is locked to prevent other users from changing the data without first unsigning the section

Armstrong, Eileen R.
Adm. No. 902

MDS 2.0
Electronic Signatures MDS

Signed

RB2a - RN Assessment Coordinator Jennifer Eiseman

VB1 - RAP Assessment Signature Jane Blackburn

VB3 - RAP Case Plan Signature Jane Blackburn

Electronically signing your name will automatically sign it where ever it appears on this page. Unsigning it will unsign only the selected field.

Signed	Sections Completed By	Signed	Sections Completed By
<input type="checkbox"/>	AT	<input type="checkbox"/>	K Stephen Ivy
<input type="checkbox"/>	AA Jennifer Eiseman	<input checked="" type="checkbox"/>	L Jane Blackburn
<input type="checkbox"/>	AB Jennifer Eiseman	<input checked="" type="checkbox"/>	M Jane Blackburn
<input type="checkbox"/>	AC Jennifer Eiseman	<input type="checkbox"/>	N Robert Milford
<input checked="" type="checkbox"/>	A Jane Blackburn	<input checked="" type="checkbox"/>	O Laura Darrell
<input checked="" type="checkbox"/>	B Jane Blackburn	<input checked="" type="checkbox"/>	P Laura Darrell
<input checked="" type="checkbox"/>	C Laura Darrell	<input type="checkbox"/>	Q Jennifer Eiseman
<input checked="" type="checkbox"/>	D Laura Darrell	<input type="checkbox"/>	R Jennifer Eiseman
<input type="checkbox"/>	E Jennifer Eiseman	<input type="checkbox"/>	S
<input type="checkbox"/>	F Jennifer Eiseman	<input type="checkbox"/>	T Jennifer Eiseman
<input checked="" type="checkbox"/>	G Laura Darrell	<input type="checkbox"/>	U
<input checked="" type="checkbox"/>	H Laura Darrell	<input checked="" type="checkbox"/>	V Jane Blackburn
<input checked="" type="checkbox"/>	I Laura Darrell	<input checked="" type="checkbox"/>	W Jane Blackburn
<input checked="" type="checkbox"/>	J Laura Darrell		


Exit

Pressure Sore Risk

Monitors the residents in the facility who are at risk for skin breakdowns or pressure sores.

KEY FEATURES:

- § Flags residents with a score of 8> for skin risk
- § Invalidation allows tracking of resident changes
- § Create a Care Plan problem directly from the Pressure Sore Risk module

Pressure Sore Risk
Screen 1/3 

Alexander, Tom A.
Adm. No. 904

RESTRICTIONS: upon admission and quarterly (at a minimum) thereafter, assess the resident status in the eight clinical condition parameters (A-H listed below) by assigning the corresponding score that best describes the resident in the appropriate assessment column. The computer will add the column of numbers to obtain the Total Score. If the total score is 8 or greater, the resident should be considered at HIGH RISK for skin breakdown and a care plan should be initiated immediately.

	Qtr 1	Qtr 2	Qtr 3	Qtr 4	
03/31/05	--	--	--	--	Enter dates as mm-dd-yy
8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A. LEVEL OF CONSCIOUSNESS/MENTAL STATUS 0. ALERT - oriented x 3 1. LETHARGIC - some disorientation, slow to respond 2. SEMI-COMATOSE - responds to verbal or painful stimuli 3. COMATOSE - no response OR consistent wanderer
1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	B. AMBULATION AND MOBILITY 0. INDEPENDENT - requires only supervision 1. LIMITED ASSISTANCE - requires minimal physical assistance for ambulation or transfers 2. CHAIRFAST - non-ambulatory. Transfer requires assist and/or physical restraints 3. BEDFAST - total dependence. Spends 75% of time in bed and/or CONTRACTURES
1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	C. INCONTINENCE - BOWEL AND BLADDER 0. CONTINENT 1. OCCASIONALLY INCONTINENT - 2 or less incidents/24 hrs. and occasional diarrhea/constipation 2. USUALLY INCONTINENT - 2 or more incidents/24 hrs. (urine) 3. INCONTINENT - no control; constant diarrhea
Total For Items A-H	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	


Fall Risk

This module is a tool that is used to determine the people who are at risk for falls.

KEY FEATURES:

- § Flags residents with a score of 10> for skin risk
- § Invalidation allows tracking of resident changes
- § Create a Care Plan problem directly from the Fall Risk module

Alexander, Tom A.
Adm. No. 904

Fall Risk Assessment
Screen 33 

Otr 1 Otr 2 Otr 3 Otr 4

02-29-06 -- -- -- -- Enter dates as mm-dd-yy

G. MEDICATIONS
Respond below based on the following types of medications:
Anesthetics, Antihistamines, Antihypertensives, Antineoplastic,
Benzodiazepines, Cathetics, Diuretics, Hypoglycemics,
Narcotics, Psychotropics, Sedatives/Hypnotics.

0. NONE of these medications taken currently or within last 7 days
1. TAKES 1 - 2 of these medications currently and/or within last 7 days
2. TAKES 3 - 4 of these medications currently and/or within last 7 days
3. If resident has had a change in medications and/or change in dosage in the past 5 days = score 1 additional point

H. PREDISPOSING DISEASES
Respond below based on the following predisposing conditions:
Hypotension, Vertigo, CVA, Parkinson's disease, Loss of limb(s),
Secures, Arthritis, Osteoporosis, Fractures.

0. NONE PRESENT
1. 1 - 2 PRESENT
2. 3 OR MORE PRESENT

Total For Items A-H

Assess	Person Assessing	Title	Date	Assess	Person Assessing	Title	Date
1.	Jane Blackburn	Administrator	02-29-06	3.			--
2.			--	4.			--

MPAF

This module offers a choice to complete and submit the optional shorter MPAF form rather than the full assessment.

KEY FEATURES:

- § Short PPS form, per the CMS guidelines
- § Saves data entry time

Alexander, Tom A.
Adm. No. 904

MPAF
Assessment Information/Status

82. SIGNATURES OF PERSONS COMPLETING THE ASSESSMENT

a. RN Assessment Coordinator
[Dropdown]

b. Date RN Assessment Coordinator signed as complete
[Text]

T1. SPECIAL TREATMENTS AND PROCEDURES
Skip unless this is a Medicare 5 day or Medicare readmission/return assessment

b. ORDERED THERAPIES—Has physician ordered any of following therapies to begin in FIRST 14 days of stay—physical therapy, occupational therapy, or speech pathology service?

0. No 1. Yes

c. Through day 15, provide an estimate of the number of days when at least 1 therapy service can be expected to have been delivered.

d. Through day 15, provide an estimate of the number of therapy minutes (across the therapies) that can be expected to be delivered.

T3. CASE MIX GROUP

a. Medicare [Text] [Text] [Calculate]

b. State [Text] [Calculate]

MSPPS Modifier 01 [Text] [Select]

Completed By [Dropdown] Section Completed [Exit]

ASSESSMENT STATUS

Check assessment for completeness
[Check] *Assessment is NOT complete*

Open/Close assessment for editing
[Close] *Open for editing*

[Send] *Add assessment to list of assessments to be submitted*


Behavior Monitoring

This add-on enables users to add standard behaviors to the program.

KEY FEATURES:

- § Print a separate flowsheet for behaviors
- § Behaviours are displayed in their own category on the physician order's printout for easy reference

Allison, Matilda
Adm. No. 365070601

POMAR Behavior 

2 Items Prescribed

Seq	Behavior	Start Date	PRN Rationale
01	Monitor for disruptive behavior	Oct 01 2004	
02	Monitor Sleeping Habits at night	Oct 01 2004	

Rx Date: Start Date: D/C Date: PRN: PRN Rationale:

Dosage: Behavior related to / Comments:

Frequency: Route: Administration Times: Every Day at 08:00

PRN Lines: Sort Order:

§

Dietary Tray Cards

This module enables users to print dietary information on a 3 7/8" x 3" card. Sort by cart, room, or name.

KEY FEATURES:

- § Print by residents, carts, or by tables
- § Print Nourishment labels
- § The tray card printout includes the following information:
 - Name
 - Care Unit
 - Room/Bed
 - Cart #
 - Diet Type/Consistency restrictions,
 - Drinks
 - Allergies
 - Nourishments,
 - Likes/Dislikes

Select Tray Carts

[Reports](#)
[Select Tray Carts](#)

Carts

Cart 1

Residents On Cart, but not on final print list

Final Print List

Cart	Room	Resident
1	100	Lilly, John
1	101	Andrews, Blossie
1	103	Conner, Ruth
1	104	White, Marian
1	105	Sulter, Claudene
1	105	Sulter, Claudene
1	1A	Armstrong, Eileen
1	1B	Kelly, Evelyn
1	2A	Lewis, Hazel
1	2A	Alexander, Tom
1	2B	Davidson, William

Add Select one or more carts from the Cart list and then click Add.

Delete Select one or more carts from the Cart list or residents from the Final Print List and click Delete

On-Delete Select one or more deleted residents (residents with XX) from the Final Print List and click On-Delete

Move Return Select one or more residents from either resident list and then click on Move Return to move (return resident(s)) to from special cart

11 of 11
residents selected

If resident is temporarily on a special cart, the cart number in the Final Print List will appear as SP1, SP2 etc.
If deleted, "XX" will appear and card will not be printed.

Cart/Room Setup

View Special Carts

Exit

Civil Rights Report

This add-on is a report which tracks and displays the residents by age, gender, and race. A sample is included in our Sample Reports book which is available to download from our website at www.wincare.com/Software/SampleReports.html

Swing Beds

Swing Beds is designed specifically for rural hospitals.

KEY FEATURES:

- § Automatically calculates the case mix group
- § Prints the form and data without requiring pre-printed forms
- § Create transmission file per CMS specifications for Swing Beds

The screenshot displays the Swing Beds software interface. At the top left, the patient's name "Allison, Matilda" and administrative number "Adm. No. 365070601" are shown. The title "Swing Beds" is in the top right corner. Below the patient information is a table with columns for "Assessment", "Reference", "Complete", and "Closed". A single row is visible with the assessment "Other", reference "85-27-84", complete date "10-01-04", and closed date "10-01-04". At the bottom of the window, there are several buttons: "Add", "View", "Modify", "Copy", "Delete", "Inactivate", "Print", "Transmit Files" (with sub-buttons "Create" and "View"), and "Exit".

Assessment	Reference	Complete	Closed
Other	85-27-84	10-01-04	10-01-04

IRF

The IRF add-on module enables the creation of an inpatient rehabilitation patient assessment.

KEY FEATURES:

- § Automatically calculates the case mix group
- § Prints the form and data without requiring pre-printed forms
- § Create IRF transmission file per CMS specifications



The screenshot displays a software window for an IRF assessment. At the top left, the patient's name "Bishop, Fern J." and administrative number "Adm. No. 401081502" are shown. A small "IRF" icon is in the top right corner. Below the patient information is a table with three columns: "Type", "Creation Date", and "Status". The table contains one entry: "New Assessment" with a creation date of "05-27-04" and a status of "OPEN". To the left of the table is a vertical scroll bar. At the bottom of the window, there are several buttons: "Add", "Edit", "Delete", "Correct", "Inactivate", "Export", "Create", "View", "CMG", "Print", and "Exit".

EMR (Electronic MAR charting)

Call for details regarding this new addition to our WinCare suite at 800.423.1083

1500 Physician Billing Form

This add-on is the 1500 form which enables the facility to bill for physicians. Call for details at 800.423.1083

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