# Chronicle Pro Walkthrough



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### Element A - Referral if required by participants insurance

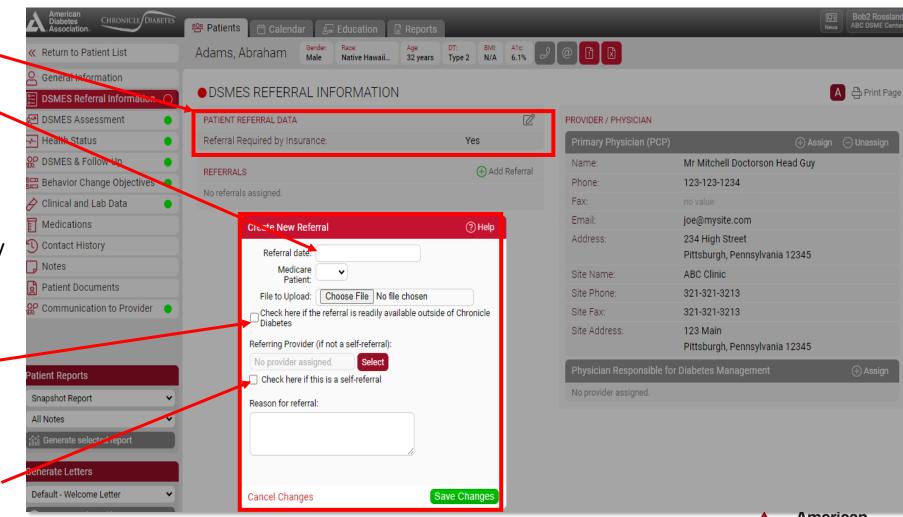
If referral is not required, then this section turns green.

If you Indicate Yes, you will need to enter:

- Referral Date
- Medicare Yes/No
- Add referring provider.
- Upload referral This can be any Microsoft Office document

If the referral is readily available outside of Chronicle, then you cancheck the box and the upload is not required.

You can also indicate here if this is a self-referral, and the referral is not required.





### **Element B – DSMES Assessment**

- All sections of the DSMES
   Assessment and Health Status
   sections need to be documented
   for this section to turn green.
- You will notice two new sections we have added – Emergency Preparedness and Dental and Eye Exam questions.
- Be sure that after the assessment has been completed that you sign the assessment form and date it.

American	$\sim$									Bob2 Rosslan		
American Diabetes Association CHRONICLE	DIABETES 2	😤 Patients 🛛 📋 Calenda	ar 🛛 🖾 E	ducation	🔓 Reports		_	_	_	News Bob2 Rossland ABC DSME Cente		
« Return to Patient List		Adams, Abraham		Race: Native Hawaii	Age: 32 years	DT: BMI: Type 2 N/A	A1c: 6.1%					
General Information										_		
🗄 DSMES Referral Informati	ion 😐	DSMES ASSESS	MENT	Bedit DSMES	S Assessmen	t				🖪 🖨 Print Page		
త్తా DSMES Assessment	•	PROVIDER SIGNATURE AN	ND REVIEW D	DATE			Ø	Medical / Health His	tory 🔍			
🕶 Health Status	•	Date completed:		Clin	ician Signat	ure:		BARRIERS TO CARE	BARRIERS TO CARE			
୍ଲୁ ଅଧିକ DSMES & Follow-Up	•	Oct 4, 2023		Bob	2 Rossland			Current barriers:				
Behavior Change Objectiv	ves 😐	Diabetes History •						Food / Caregiver / Support	t Network			
🔗 Clinical and Lab Data								DIFFICULTY WITH		Ø		
Medications		TYPE OF DIABETES					Ľ	Do you have difficulty with	any of the following:			
Contact History		Туре 2						no value	any of the following.			
🕞 Notes		YEAR DIAGNOSED WITH D	ABETES				Ø			-0		
Patient Documents		1999						GENERAL HEALTH FEELINGS		Ø		
SP Communication to Provide	ler 😐							General feelings about hea Good	alth:			
		BLOOD SUGAR MONITORII	NG				Ø	GOOU				
		Monitors blood sugar:			Yes			PAIN		Ø		
		Frequency of blood suga	ar checks:		no value			Has Chronic Pain:	No			
Patient Reports		Times of blood sugar ch	necks:		no value			Where:	no value			
Snapshot Report	~	Usual AM blood sugar v			no value			How long:	no value			
All Notes	~	Usual PM blood sugar v			no value			Any treatment:	no value			
👬 Generate selected report		Blood sugar value 1-2 ho	ours after m	neals:	no value			Treatment Description:	no value			
		Brand of monitor used:						Rating of pain (1 being slig	ht and 10 being severe):	no value		
Generate Letters		no value								-0		
Default - Welcome Letter	~	Model of monitor used: no value						ALLERGIES		Ø		
🕞 Generate selected letter		no value						No Allergies				
🗄 Launch Letter Manager		URINE KETONE TESTING					Ø	NO Allergies				



### Elements C, D and E - Development of Education Plan, Education Intervention and Learning Outcomes (1 of 5)

#### Group or 1:1 Education

A minimum of one 1:1 or group encounter is required in order for the assessment to be made available for documentation.

« Return to Patient List	Adams, Abraham	Gender: Male	Race: Native Hawaii	Age: 32 years	DT: Type 2	BMI: N/A	A1c: 6.1%	2 @ 🗋 😫		
Ceneral Information	DSMES & FOLLO	)W-UP						,		C,D,E
🚰 DSMES Assessment 🛛 🌒	EDUCATION SUMMARY					۱	New 1:1	EDUCATION STATUS		
🕂 Health Status 🌒	Adams, Abraham - Au	gust (1:1	Session)			,		Patient's total educated I		
OP     DSMES & Follow-Up       Image: Behavior Change Objectives	Location: ABC DSME Ce	nter			Give th name i	in the cl	ass a nam ass name.	e (e.g. "Initial visit"). Don't inclu Enter the date and time (optio		no value no value
🔗 Clinical and Lab Data 🛛 🌒	FOLLOW-UP SUMMARY				meetin Class N		he patient	Class Type		
T Medications	This patient does not	-		igned. To a		Assessn	nent	Comprehensive and/or Initial	•	Yes
🕤 Contact History	the "New Follow-Up" b	utton abo	ove to add.		Session	n Date		Session Time	Reason for Class	Sep 5, 2023
D Notes					08/01/			8:00 AM	Initial assessment	no value
Patient Documents					Duratio	n in 🗸	Type of In DSMES	ntervention		
👷 Communication to Provider 🌘					30 11	·····	DOIVIES			N
					Cancel	Change	es		Save Changes	
	PATIENT EDUCATION REC	ORD								
Patient Reports	This patient does not	have any	education or fo	llow-ups a	ssigned. I	Before ι	ipdating th	e patients education record, pl	ease add education or a	follow-up
Snapshot Report 🗸 🗸										
All Notes 🗸	EDUCATION PLAN									
Generate selected report	This patient does not	have any	education or fo	llow-ups a	ssigned.	Before	updating th	ne patient's Education Plan, ple	ase add education or a fo	ollow-up.

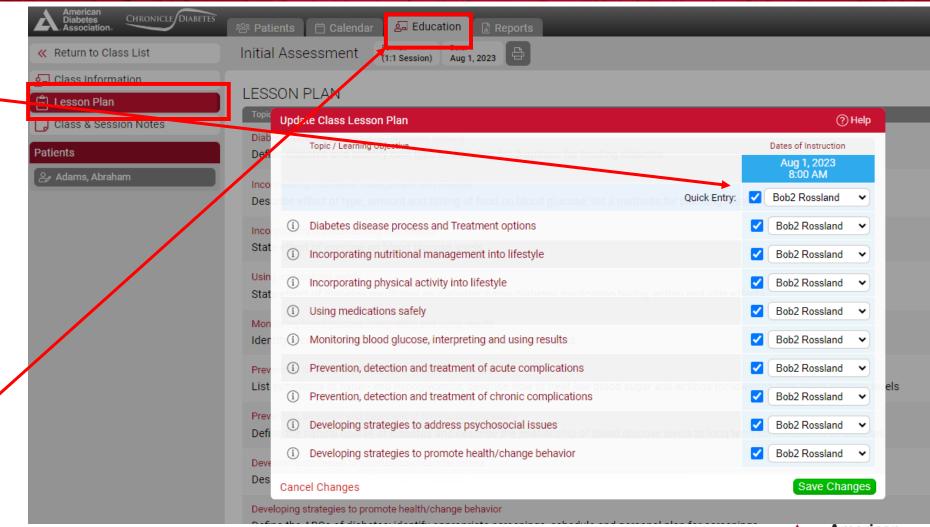


### Elements C, D and E - Development of Education Plan, Education Intervention and Learning Outcomes (2 of 5)

#### Group or 1:1 Education – Lesson Plan

Any topics/learning objectives that score below a 3 in the (next page) **preassessment** will need to be documented as instructed under the lesson plan of the 1:1 or group education class.

The lesson plan can be found under the education tab or through the participant record





### Elements C, D and E - Development of Education Plan, Education Intervention and Learning Outcomes (3 of 5)

Pre-Assessment -

- Based upon educator's initial assessment of patient's knowledge, you will need to document the Pre-Assessment
- All topics that score under a 3 will need to be documented as taught in the 1:1 or group class (previous slide).

Location: ABC DSME Center				Education Complete	i.	Yes	
	Update Patient E	ducation Record					⑦ Help
OLLOW-UP SUMMARY	Topic / Learn	ing Objective		Pre Assessment	Assessed During	Clinician Signature	
This patient does not have any follow- the "New Follow-Up" button above to a			Quick Entry	: 🚺 2 3 4 🛯	Apply to all 🗸	Apply to all	•
	(i) Disease Pr	ocess			Initial Assessment (8/1) 🗸	Marge Simpson	V Q
PATIENT EDUCATION RECORD	(i) Nutritional	Management			Initial Assessment (8/1) 🗸	Marge Simpson	• Q
Topic / Learning Objective	(i) Physical Ad	ctivity/Being Activ	е		Initial Assessment (8/1) 🗸	Marge Simpson	• Q
Disease Process	i Taking med	lications			Initial Assessment (8/1) 🗸	Marge Simpson	V Q
Nutritional Management	(i) Monitoring				Initial Assessment (8/1) 🗸	Marge Simpson	• Q
Physical Activity/Being Active	(i) Acute com	plications/Probler	n Solving		Initial Assessment (8/1) 🗸	Marge Simpson	v p
Taking medications	(i) Chronic co	mplication/Reduc	ing Risks		Initial Assessment (8/1) V	Marge Simpson	v D
Monitoring	<ol> <li>Psychosoc</li> </ol>	ial Adjustment/he	althy Coping		Initial Assessment (8/1) 🗸	Marge Simpson	• 0
Acute complications/Problem Solving							
Chronic complication/Reducing Risks		ealth/change beha			Initial Assessment (8/1) V	Marge Simpson	• 0
Psychosocial Adjustment/healthy Copir	Key: 1 Needs ins	truction 2 Needs	s review 3 Con	nprehends key points 4	Demonstrates competency	Not applicable	
Promote health/change behavior	Cancel Changes					Save	Changes
(ey: 1 Needs instruction 2 Needs review	3 Comprehends ke	y points 4 Demo	nstrates competen	cy N/A Not applicable	NV No Value		

ad by ScoreMD - 172 18 37 54 - Mon Oct 9 2023 19:35

Association

### Elements C, D and E - Development of Education Plan, Education Intervention and Learning Outcomes (4 of 5)

Post Evaluation

 Any topics that are under a 3 within the pre-assessment will need the post evaluation score documented in the post evaluation section and will need a score. N/A will not be accepted.

1h	is patient does not have any follow-ups as:	signed. To a	dd a follov	v-up,		Patient	t follo	w up success			
da	te Patient Education Record								?	) Help	
	Topic / Learning Objective	Post Evaluat	tion	Asse	ssed Durin	ıg	С	linician Signature			
	ENTEDUCATION RECORDED Quick Entry	: 🚺 🔼 🌘	3 4 🛯	Ap	ply to all.		• (	Apply to all	~		
i)	Disease Process				tial Asses	sment (8/1)	•	J Brad Ummer	•	Q	
Ð	Nutritional Management			Ini	tial Asses	sment (8/1)	•	J Brad Ummer	•	Q	
Ð	Physical Activity/Being Active				tial Asses	ssment (8/1)	•	J Brad Ummer	•	Ω	
Ð	Taking medications			Ini	tial Asses	ssment (8/1)	•	J Brad Ummer	•	Ω	
Ð	Monitoring				tial Asses	ssment (8/1)	•	J Brad Ummer	•	Q	
D	Acute complications/Problem Solving			Ini	tial Asses	ssment (8/1)	•	J Brad Ummer	•	Ω	
D	Chronic complication/Reducing Risks				tial Asses	ssment (8/1)	•	J Brad Ummer	•	Q	
i)	Psychosocial Adjustment/healthy Coping				tial Asses	ssment (8/1)	•	J Brad Ummer	•	Q	
i)	Promote health/change behavior				tial Asses	ssment (8/1)	•	J Brad Ummer	•	Q	
y:	1 Needs instruction 2 Needs review 3 Cor	nprehends key j	points 4	Demon	strates cor	mpetency N	A Not a	applicable			

### Elements C, D and E - Development of Education Plan, Education Intervention and Learning Outcomes (5 of 5)

#### Education Completion Status -

 Education will need to be documented as complete along with the date to turn this section green.

DSMES & FOLLOW-	UP			G	<b>,D,E</b> 🖶 Print Page						
EDUCATION SUMMARY		(+) New 1:1	EDUCATION STATUS								
Adams, Abraham - Initial A	ssessment (1:1 Session)	☑ ♣	Patient's total educated hours								
Location: ABC DSME Center			Total:	0 hours 30 minute	s						
1 Aug 1, 2023	1:1 Session	Attended	Total (last 12 months):	0 hours 30 minute	s						
Adams, Abraham - August	(1:1 Session)	ď 4	Patient completed education	program 🔵	🖉 Edit						
Location: ABC DSME Center			Education Complete:	Yes							
			Date Completed:	Sep 5, 202	23						
FOLLOW-UP SUMMARY		New Follow-Up	Education Status Note:								
This patient does not have click the "New Follow-Up" b		To ad <del>d a fo</del> llow-up,	Patient follow up success	Patient Status	? Help						
			Patient Lost to Follow-Up:	<ul> <li>Education Complete</li> <li>Date Completed</li> </ul>	No						
PATIENT EDUCATION RECORD				09/05/2023							
Topic / Learning Objective			Pre Assess.	Education Status Note							
Disease Process			2								
Nutritional Management			0	Cancel Changes	Save Changes						
Physical Activity/Being Activ	ve		0	ouncer onunges	care changes						
Taking medications			3		4						



## Elements F, G – Behavioral Goal/s Set & Behavioral Goals Follow Up

#### Behavioral Goal(s)

• A **baseline** and **follow-up** on at least one behavioral goal are required to meet the F & G elements of the DSMES cycle.

Submatal Auformitation Co	OBJE	ECTIVES 🔵				🕀 Add New Objective
DSMES Reference      DSMES Assessment	$\rightarrow$					🕞 Delete 🛛 🖉 Update
E Path Gatie		Nutritional Management/He	althy Eating			😑 Delete 🛛 🖉 Update
SP DSMES & Follow-Up		Established/Updated	Objective	Achievement	Status	Barriers Addressed
🔠 Behavior Change Objectives 🔵	~	Oct 2, 2023	Overeat less often	75% (Most of the time)	Continued	No
🔗 Clinical and Lab Data 🛛 🔵		Plan:				
Medications		Not buy chips				
🕥 Contact History	7	8				
D Notes	⊂ E					
Patient Documents		Eat chips < 3 a week				
🔗 Communication to Provider 🌘		Followup Method:	In person			
	~	Sep 1, 2017	Overeat less often	0% (None of the time)	Baseline	Yes
Patient Reports		Plan:				
Snapshot Report 🗸		Not buy chips				
All Notes	Z	Outcome:				American Diabetes
Generate selected report		Eat chips < 3 a week				Association

### **Element H – Measurement of Participant Outcomes**

#### Clinical or Quality of Life Outcome(s)

• A **baseline** and **follow-up** are required to meet element H of the DSMES cycle.

E DSI 1/28 Referral /aformation		CLIN	ICAL AND LAB DATA		H
🔄 DSMES Assessment 🕒	- A	baseli	he and follow-up on at least one lab value are required to meet element H of the DSMES cycle.		
Helth sate Ct S	1	TEST RE	SULTS Add test		<b>₽</b> N
SP DSMES & Follow-Up	5	> 1	eight: 72.00 inches		Ð
Behavior Change Objectives 😑	5	- V I	bA1c: 6.1 %		Ð
🔗 Clinical and Lab Data 💦 🐧			Date Result		
Medications		~	Oct 1, 2023 6.1 %		
🕙 Contact History	$\mathbb{D}$		Source:		
D Notes		Ø	Lab/physician reported, Entered by educator		
Patient Documents		X	Lab, physician opported, Entered by eddeator		
OP Communication to Provider	D	~	Feb 1, 2023 9.0 %		
		ľ	Source:		
Patient Reports		Θ	Patient reported, Entered by patient		
Snapshot Report 🗸		> L	pid Profile: Total: 1, HDL: 5, LDL: 3, Trig: 10 mg/dl	Δ	American Diabetes Association
All Notes 🗸	,				

### **Element I – Communication to Provider**

- Date of communication, method of communication and result of communication are required. If other is chosen, then Other (details) are required.
- If you are not able to upload the communication to the provider, click on the check box to indicate that communication is readily available outside of Chronicle.

« Return to Patient List	Adams, Abraham Gender: Race: Age: DT: BMI: A1c: 2 @ 1 2
Seneral Information	
DSMES Referral Information	
🔄 DSMES Assessment	COMMUNICATIONS TO PROVIDER
🛃 Health Status	Date Submit Patient Provider Communication
DSMES & Follow-Up	Select the most appropriate method of communication to classify this contact. Give
Behavior Change Objectives	<ul> <li>the communication a description. Select the document from your computer. Note the acceptable file types are PDF (.pdf) or Mcrosoft Office (.doc, .docx, .xls, .xlsx, .ppt,</li> </ul>
🔗 Clinical and Lab Data	.pptx). The maximum file size is 2MB.
Medications	Date of Provider Communication: 10/01/2023
🕤 Contact History	Method of Communication: Patient progress has been routed or C(
D Notes	Other (details):
Patient Documents	Result of Communication: Emailed/Faxed  Communication has been routed to the
୍ଦ୍ରୁ Communication to Provider	O         Notes Regarding Provider Communication:         Communication has been routed to the provider through the EMR.
	Provider: No provider assigned. Select
Patient Reports	File to Upload: Choose File No file chosen Check here if the communication to the provider is readily available outside of Chronicle
Snapshot Report	Check here in the communication to the provider is readily available outside of chromicle     Diabetes
All Notes	~
Generate selected report	Cancel Changes Save Changes



### **A-I DSMES Cycle Status**

The A-I cycle is considered complete when the 7 sections that previously had red lights are now all green.

			· · ·				
General Information							
🗄 DSMES Referral Informatio	n 😐	GENERAL INFORMATION					合 Print Page
🔄 DSMES Assessment	•	PATIENT NAME / ID		Ø	PATIENT TYPE		Ø
🕂 Health Status	•	Abraham Adams			No patient type assigned.		
SMES & Follow-Up	•	Patient ID:	no value		DEMOCRADILIOS		
🔠 Behavior Change Objective	s 🔹	Medicaid ID:	no value		DEMOGRAPHICS		Ľ
		EMR Integration ID:	no value		Date of Birth:	Oct 7, 1991 (32 yrs. old)	
🔗 Clinical and Lab Data	•	Status:	Active		Gender:	Male	
Medications		Chronicle ID (internal):	45790		Race:	Native Hawaiian or Other Pacific	Islander
🕤 Contact History		onionicie ib (internal).	40790		Occupation:	Homemaker	
🕞 Notes		PATIENT INTEGRATION		Ľ	Preferred Language:	English	
Patient Documents		Integration ID:			Education:	no value	
P Communication to Provide	r •				How did you find out about	the program:	
10/1		WEB LOGIN		Ľ	Website / Healthcare Provi	der / Newspaper / Friend	



### **Additional Functions – Chart Audit Report**

Within each patient chart you have the option to print an identified OR de-identified chart audit report. Each letter of the A-I cycle is highlighted on the report.

American Diabetes Association	Patients  ☐ Calenda	ar 🖾	Education [	Reports							Bob2 ABC D
« Return to Patient List	Adams, Abraham	Gender: Male	Race: Native Hawaii	Age: 32 years	DT: Type 2	BMI: N/A	A1c: 6.1%	I	@ 🖪 🗷		
🛆 General Information											_
E DSMES Referral Information	GENERAL INFORM	1ATION								₿ P	
🚰 DSMES Assessment 🛛 🕚	PATIENT NAME / ID						Ű	>	PATIENT TYPE		
🕂 Health Status 🔹	Abraham Adams								No patient type assigned.		
🔗 DSMES & Follow-Up 🛛 🕒	Patient ID:		no va	lue					DEMOODADI IIOO		
📇 Behavior Change Objectives 🕒	Medicaid ID:		no va	lue					DEMOGRAPHICS		
Clinical and Lab Data	EMR Integration ID:		no va	lue					Date of Birth:	Oct 7, 1991 (32 yrs. old)	

**Please Note:** The system currently does not automatically download the report as a PDF. When you select print you can choose either print to PDF or Save as PDF depending on the version of Microsoft Office you are using.



## Additional Functions – Patient Search by DSMES Cycle Status and Encounter Date and View Missing Documentation

You can now search patient records by the DSMES Cycle Status (complete or not complete) and by the encounter date.

- DSMES Cycle Status -
- Encounter Date 🔽
- Missing This section indicates which elements of the DSMES cycle have not been documented within the chart.

5	😕 Patients 📋 Calendar 🛛 🗔 Edu	cation 🔓 Reports	_		Bob2 Rossland ABC DSME Center			
s ——	Search patients			DSMES cycle status: DSMES Cycle Status 💙	Patient Status: Patient Status 💙	Limit Results by Cohort: Limit results by cohort	• ×	
	Start Date: End Date: mm/dd/yyyy 🗖 mm/dd/yyyy	Encounter/Lab	or Follow up					
• I	NAME	GENDER/RACE D	DOB TYPE	VISITS	ASTIONS	MISSING		
on	<ul> <li>Adams, Abraham</li> </ul>		Dct 7, 1991 Age: <b>32</b> Type 2	Last: Aug 1, 2023				
ements e have	Anderson, Alexander		May 17, 1992 Age: <b>31</b> Type 2	Last: Jul 1, 2012		A,B,C,D,E,I		
ited	<ul> <li>August, April</li> </ul>		Jun 11, 2018 Age: 5 Type 2		🖂	B,C,D,E,F,G,H,I		
	<ul> <li>Bachota, Alyssa A S.</li> </ul>		Sep 12, 1945 Age: <b>78</b> Type 2	Last: Feb 18, 2022	<b>.</b>	B,F,G,I		
	<ul> <li>Bailey, Amanda</li> </ul>		Aug 30, 1987 Age: <b>36</b> Type 2	Last: May 16, 2012	<b>iii</b> 🖂	A,B,C,D,E,F,G,H,I		
	Bainbridge, Amber Sara		Aug 24, 1990 Age: <b>33</b> Type 2	Last: Apr 15, 2013		A,B,C,D,E,F,G,H,I		
	<ul> <li>Barkley, Andre</li> </ul>		Nov 3, 1950 Age: <b>72</b> Type 2			A,B,C,D,E,F,G,H,I		

### **Additional Functions – Calendar Feature**

• The new calendar function will allow users to see upcoming classes, sessions, and scheduled follow-ups by month, week or day.

• By clicking on the session and/or follow-up you can jump right to the session.



### **Subscription Information**

Current Chronicle Users (Services that have been using Chronicle prior to October 16, 2023):

Your service will be able to utilize Chronicle Pro free for 90 days starting October 16<sup>th</sup>. After 90 days the Chronicle Pro features will be disabled, and your service can either subscribe to Chronicle Pro or continue to use the current standard version of Chronicle. There will be an email communication to the Quality Coordinators 30 days prior to the 90-day mark with instructions on how to subscribe to Chronicle Pro.

New Chronicle Users (Users that have "turned on" Chronicle after October 16, 2023):

Your service will be able to utilize Chronicle Pro free for 90 days after Chronicle is "turned on" within the Chronicle tab of the ERP Portal. After 90 days the Chronicle Pro features will be disabled, and your service can either subscribe to Chronicle Pro or continue to use the current standard version of Chronicle. There will be an email communication to the Quality Coordinator 30 days prior to the 90-day mark with instructions on how to subscribe to Chronicle Pro.

#### **Chronicle Pro Subscription Fees:**

- 1 Year \$150.00
- 4 Year \$400.00 (\$200 savings)

Please Note: The current version of Chronicle Diabetes will remain free and no data that already exists within the platform will change during or after the Chronicle Pro trial period.

Please email <u>ERP@diabetes.org</u> if you have any questions.

### **Chronicle Q/A Call Registration and Webinar**

Chronicle Pro Webinar: <u>https://zoom.us/rec/share/b9GYm1q4g\_YOd-As2\_hVSUnmrdIWpWT2XWdKk4-Lq21TW1bq2WGbWD-Irp\_7soK9.nKVBtmo4iFmedZ2p?startTime=1696521486000</u>

•Passcode: 861430

Sign up for the next live Chronicle Q/A Webinar at <u>https://diabetes.org/erpqa</u>

Please email <u>ERP@diabetes.org</u> if you have any questions.