



COUNTY OF SANTA CLARA  
**Behavioral Health Services**

**UPDATE CLIENT DATA**

REV. 06/18/2024

## REVISIONS

<b>Date</b>	<b>Slides</b>	<b>Revisions</b>
06/07/2024	12	Added Sexual Orientation and Gender Identity section
06/07/2024	7, 8, 11, 13, & 14	Updated images
06/07/2024	3	Removed statement where updating information on this form will update the information in the Financial Eligibility form. This is no longer true. Any updates made to this form will also have to be updated in the Financial Eligibility form.
09/07/2023	9 & 10	Included instruction on address formatting
10/07/2022	ALL	Made minor edits to help clarify instructions

# UPDATE CLIENT DATA

## **Purpose of Form:**

The Update Client Data form allows the user to update a client's demographic information throughout the course of treatment. The information initially entered at admission may change during treatment and this form allows you to make updates, as necessary.

# HOW TO ACCESS

After login click on Search, type and select **Update Client Data**

The screenshot shows a search bar with the text "Update Client Data". Below the search bar, there is a section titled "Here is what I found:" with a close button (X). Underneath, there are filter buttons: "All 1", "Clients 0", "Staff 0", and "Forms 1". The "Forms" filter is selected. Below the filters, there is a table with the following data:

Undock	Name	Menu Option
	Update Client Data	/ Avatar PM / Client Management / Client Information


A green arrow points to the "Update Client Data" entry in the table.

After selecting the Update Client Data form, enter Client's name in the Search bar, and select client.

Select Client

Q Test, Steph

Client Name / Client ID	Gender	Date Of Birth	Social Security Number
TEST,STEPH (000002790)	Female	01/01/1990	



# Select your corresponding **PROGRAM**

✓ Selected Client : TEST,STEPH (000002790)

## Select Episode

Name: STEPH TEST  
ID: 2790  
Sex: Female  
Date of Birth: 01/01/1990


Episode	Program	Start	End
1	DTN SMH OP -Wellness	12/08/2021	



# CLIENT DEMOGRAPHICS

All fields will be auto-populated based on information inputted in the Admission form. Update fields, as necessary.

**UPDATE CLIENT DATA** Submit Discard

**Update Client Data** 

- Client Demographics
- SOGI
- Alias
- Smoking Assessment
- Agricultural Questions
- Military Service

Online Documentation

**Client Demographics**

Healthlink MRN

Prefix  x v

**Client's Legal Name \***

**\*\*Client's Legal Last Name**

**\*\*Client's Legal First Name**

**\*\*Client's Legal Middle Name**

Preferred Name (What is the name you go by?)

Suffix

Sr  Jr  III

IV  V  VI

What pronouns do you use?

**\*\*Client's Address - Street**

Social Security Number

Maiden Name

Mother's Maiden Name

Date Of Birth  🗓 T Y

Marital Status

**\*\*Preferred Language**  x v

Primary Language  x v

**\*\*Client Race**

**\*\*Ethnic Origin**  x v

Religion

Client Declined To Provide Information On The Following

Ethnic Origin  Race  Language

# PREFERRED NAME

Use the Preferred Name (1) field to record what a client prefers to be called. The preferred name displays in the Client Header (2) and in the Client Information widget.

▲ TEST-EHR, TEST-EHR (000002790)

TEST-EHR, TEST-EHR (000002790)  
F, 6, 01/01/2018  
Preferred Name: BA  
Ht: -, Wt: -, BMI: -

Ep: -  
Personal Pronouns: -  
DX P: -

Address: 828 S. Bascom Ave., San Jose, CA 951...  
Attn. Pract.: -  
Adm. Pract.: -  
Phone #: 123-456-7890

1. Active TB

### UPDATE CLIENT DATA

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Update Client Data

- Client Demographics
- SOGI
- Alias
- Smoking Assessment
- Agricultural Questions
- Military Service

Online Documentation

#### Client Demographics

Healthlink MRN:

Prefix: Select

Social Security Number: 000-00-0000

Maiden Name:

Mother's Maiden Name:

Date Of Birth: 01/01/2018

Marital Status: Select

**\*\*Preferred Language**: Cantonese

Primary Language: Select

**\*\*Ethnic Origin**: Select

**Client's Legal Name \***: TEST-EHR,TEST-EHR

**\*\*Client's Legal Last Name**: TEST-EHR

**\*\*Client's Legal First Name**: TEST-EHR

**\*\*Client's Legal Middle Name**:

Preferred Name (What is the name you go by?): BA

Suffix:

Sr  Jr  III  
 IV  V  VI

What pronouns do you use?:



## CLIENT'S ADDRESS

The client's address should be their primary residence. It can also be the client's PO Box (Format example: PO Box 123).

When you enter a California Zip code such as '95128' the City, County, State auto-populates based on the Zip code.

Zip code must be a 9-digit Zip code. Ex: 95128-9651

<b>**Client's Address - Street</b>	
<input type="text" value="123 abc st."/>	
<b>**Client's Address - Street 2</b>	
<input type="text"/>	
<b>**Client's Address - Zipcode</b>	<b>**Client's Address - City</b>
<input type="text" value="95128-9651"/>	<input type="text" value="San Jose"/>
<b>**Client's Address - State</b>	<b>**Client's Address - County</b>
<input style="border: none; border-bottom: 1px solid #ccc;" type="text" value="CALIFORNIA"/> × ▾	<input style="border: none; border-bottom: 1px solid #ccc;" type="text" value="Santa Clara"/> × ▾
<b>**Client's Home Phone</b>	<b>**Client's Work Phone</b>
<input type="text" value="888-888-8888"/>	<input type="text" value="888-888-8888"/>

## CLIENT'S ADDRESS – HOMELESS OR CONFIDENTIAL

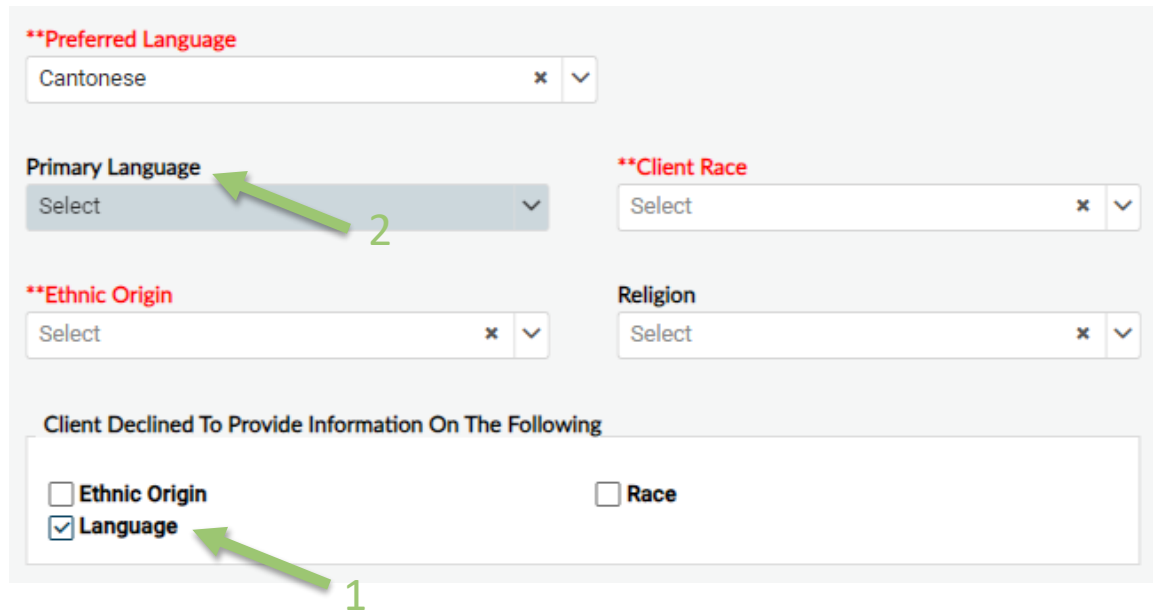
If client is homeless or address needs to be confidential, input 'Homeless' or 'Confidential' to **Client's Address – Street**.

Enter the 9-digit **Zip Code** of the CCP office the client is receiving services at.

<b>**Client's Address - Street</b>	
<input type="text" value="Homeless"/>	
<b>**Client's Address - Street 2</b>	
<input type="text"/>	
<b>**Client's Address - Zipcode</b>	<b>**Client's Address - City</b>
<input type="text" value="95128-9651"/>	<input type="text" value="San Jose"/>
<b>**Client's Address - State</b>	<b>**Client's Address - County</b>
<input style="border: none; border-bottom: 1px solid #ccc;" type="text" value="CALIFORNIA"/> * ▾	<input style="border: none; border-bottom: 1px solid #ccc;" type="text" value="Santa Clara"/> * ▾
<b>**Client's Home Phone</b>	<b>**Client's Work Phone</b>
<input type="text" value="888-888-8888"/>	<input type="text" value="888-888-8888"/>

# ETHNIC ORIGIN, RACE AND LANGUAGE

If client declines to answer Ethnic Origin, Race, or Language (1), check the corresponding box and the field will be disabled (2).



The screenshot shows a form with the following fields:

- \*\*Preferred Language**: A dropdown menu with "Cantonese" selected.
- Primary Language**: A dropdown menu with "Select" selected. A green arrow labeled "2" points to this field.
- \*\*Client Race**: A dropdown menu with "Select" selected.
- \*\*Ethnic Origin**: A dropdown menu with "Select" selected.
- Religion**: A dropdown menu with "Select" selected.

Below these fields is a section titled "Client Declined To Provide Information On The Following" containing three checkboxes:

- Ethnic Origin
- Language (A green arrow labeled "1" points to this checkbox.)
- Race

# SEXUAL ORIENTATION AND GENDER IDENTITY (SOGI)

Complete all fields that are applicable.

**Update Client Data**

- Client Demographics
- SOGI**
- Alias
- Smoking Assessment
- Agricultural Questions
- Military Service

Online Documentation

**SOGI**

What is your gender identity?

- Transgender Woman/Girl
- Transgender Man/Boy
- Nonbinary
- Genderqueer
- Agender
- Two-Spirit
- Cisgender Woman/Girl
- Cisgender Man/Boy
- Questioning
- Prefer not to answer
- Another Gender Identity

Another Gender Identity

What is your sexual orientation?

- Bisexual
- Pansexual
- Queer
- Two-Spirit
- Lesbian or Gay
- Asexual
- Straight
- Question/Unsure of Sexual Orientation
- Prefer not to answer
- Another Sexual Orientation

Another Sexual Orientation

Were you born with a variation in your physical sex characteristics? This is sometimes called being intersex or having a difference in sex development (DSD).

- No
- Yes
- Don't know
- Prefer not to answer

# ALIAS

When entering preferred name, enter the preferred name in the Alias field too. Once an alias has been recorded, you can search for client utilizing the alias.

The screenshot displays a software interface for updating client data. On the left, a sidebar menu titled "Update Client Data" includes options for Client Demographics, SOGI, Alias (highlighted with a green arrow), Smoking Assessment, Agricultural Questions, and Military Service. Below this is a link for "Online Documentation". The main content area is titled "Alias" and contains a form with 10 input fields. The first field is labeled "\*\*Alias" and contains the text "TEST CLIENT". The remaining fields are labeled "Alias 2" through "Alias 10". The "Alias 10" field also contains the text "TEST CLIENT".

Input all changes needed to be made to client's information. Once information has been added/corrected, click **Submit**.

**UPDATE CLIENT DATA**

Submit Discard

**Update Client Data**

- Client Demographics
- SOGI
- Alias
- Smoking Assessment
- Agricultural Questions
- Military Service

Online Documentation

**Client Demographics**

Healthlink MRN

Prefix

Social Security Number

Maiden Name

Mother's Maiden Name

Date Of Birth

Marital Status

**\*\*Client's Legal Name \***

TEST-EHR,TEST-EHR

**\*\*Client's Legal Last Name**

TEST-EHR

**\*\*Client's Legal First Name**

TEST-EHR

**\*\*Client's Legal Middle Name**

Preferred Name (What is the name you go by?)

Suffix

Sr  Jr  III  
 IV  V  VI

What pronouns do you use?

**\*\*Client's Address - Street**

828 S. Bascom Ave.

**\*\*Preferred Language**

Cantonese

**Primary Language**

Select

**\*\*Client Race**

Select

**\*\*Ethnic Origin**

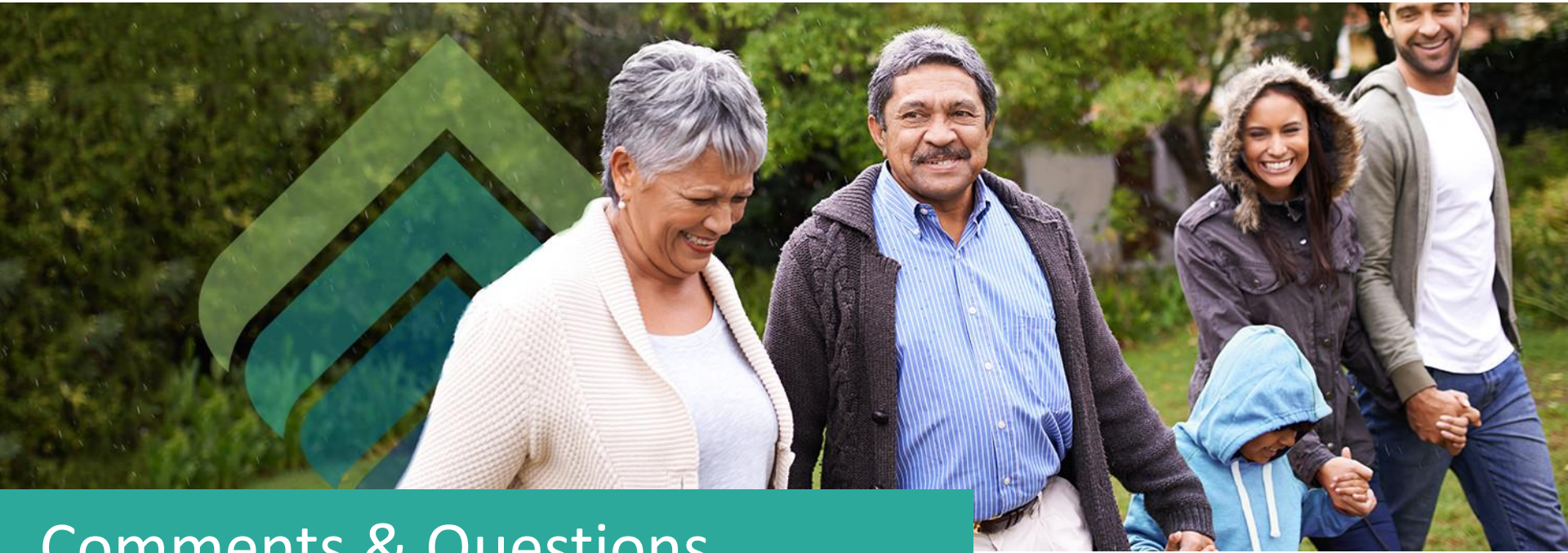
Select

**Religion**

Select

Client Declined To Provide Information On The Following

Ethnic Origin  Race  Language



# Comments & Questions