



Military OneSource

CASE MANAGEMENT SYSTEM

Call Center User Guide

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Login/Logout

- A Login/Logout link is available at the top of every page within the Military OneSource CMS site.
- Users log in using their username and password.
- If a user forgets his/her username and/or password, a “Forgot your password?” link is available on the Military OneSource CMS home page (Figure 1.1).
- Once this link is clicked, the user must enter the email address that is associated with his/her user account.
- An email is sent to the entered email address containing the username and a “Click Here” link that the user can utilize to change his/her password.
- If the user is unable to follow the “Click Here” link, the email also contains the web address that the user can copy and paste into his/her browser address bar to change his/her password.

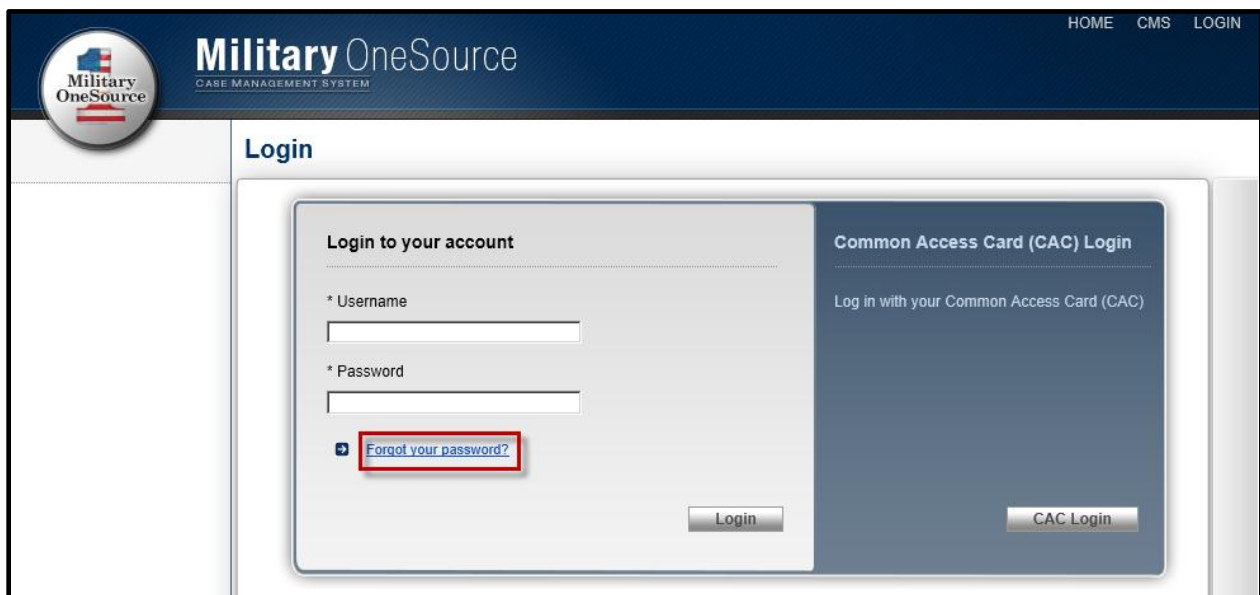


Figure 1.1

CAC/ECA Registration

- Users also have the option to register a CAC or ECA certificate. A username and password must first be established in order to associate the CAC or ECA.
- To associate a CAC/ECA to an account, click on the “CAC Login” button on the login page (Figure 2.1).

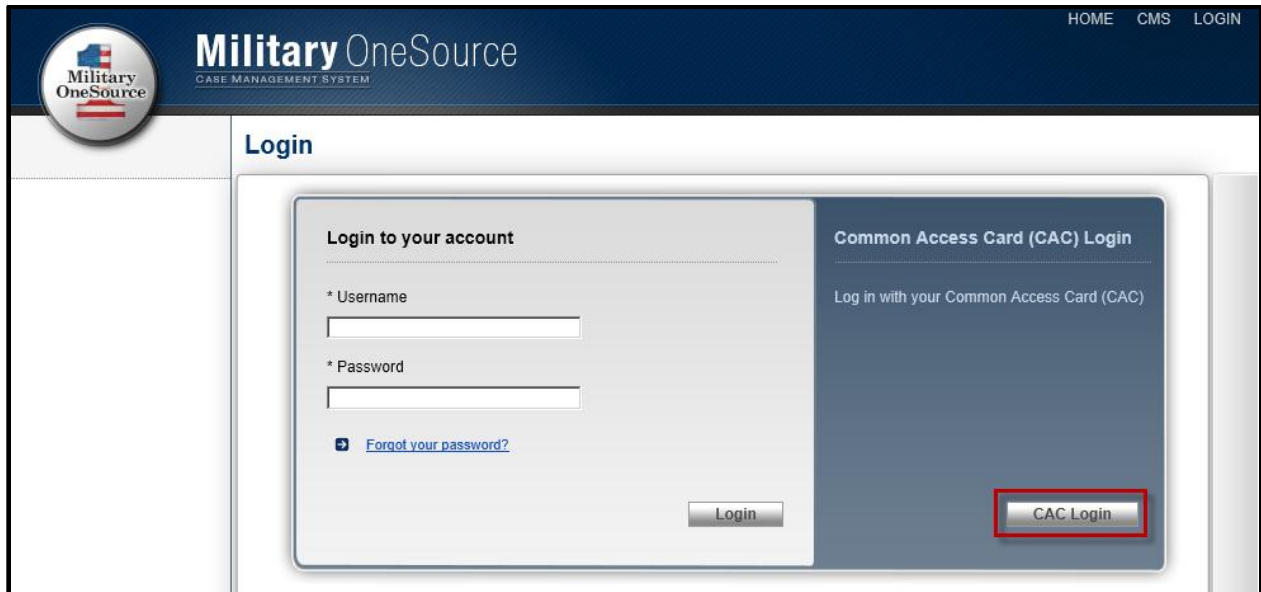


Figure 2.1

- Enter in your username and password and click on the “Register CAC Card” in order to associate your CAC/ECA to your account.
- If you forgot your username and password, you may register your CAC/ECA by entering your email and clicking on the “Send Email” button. An email will be sent to you that will contain a link that will allow you to easily register your CAC/ECA (Figure 2.2).

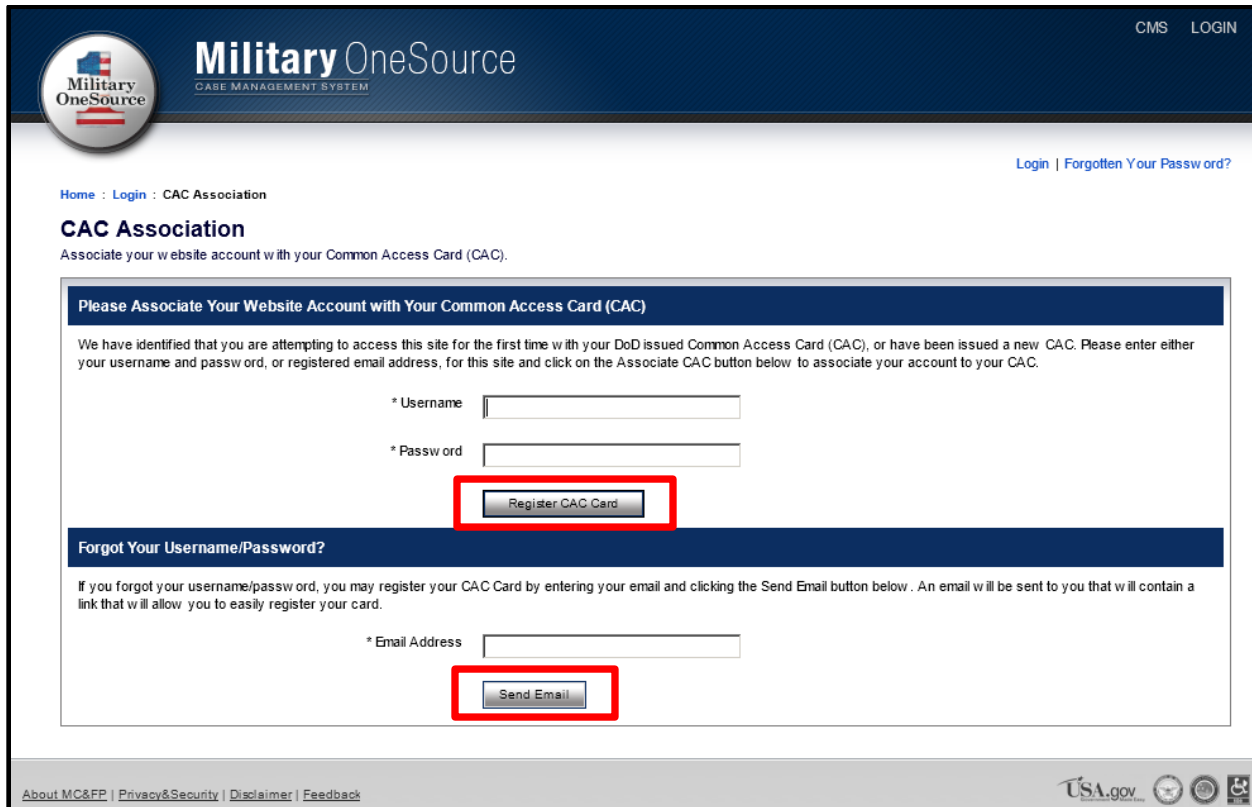


Figure 2.2

Updating Profile

- To update your profile, please click on the “Profile” link in the far upper right corner of any page (Figure 3.1).

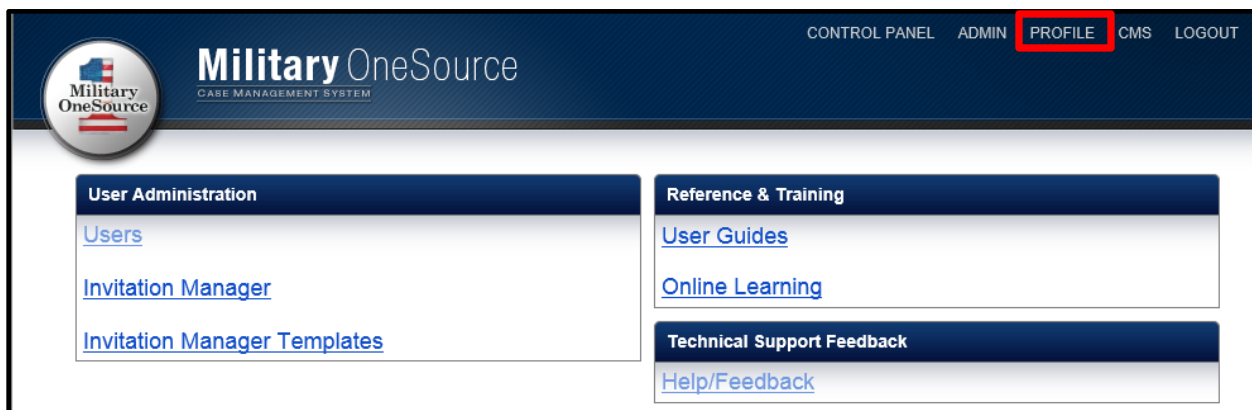


Figure 3.1

- Next, click on “Edit your Profile” (Figure 3.2).

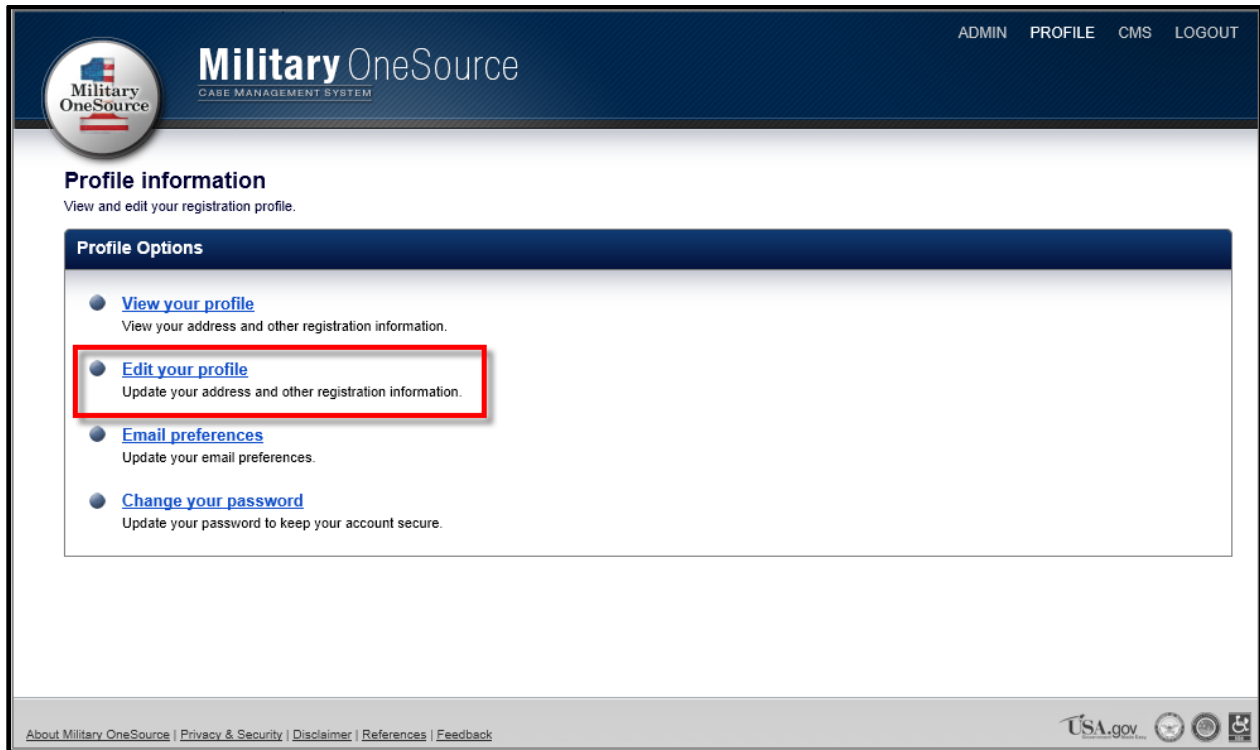


Figure 3.2

- Make the appropriate changes and select “Save.”

Incoming Calls

The steps for logging an incoming call will differ based upon the purpose of the call. Once you determine the caller’s purpose, refer to the applicable section in this document.

Purpose of call	Refer to
<ul style="list-style-type: none">• Quick information requests such as directions for local fast food, contact information for base resources, or caller dialed the wrong number	<ul style="list-style-type: none">• Quick Tracker
<ul style="list-style-type: none">• Emergency calls—crises, duty to warn, mandated reports, or adverse incidents	<ul style="list-style-type: none">• Crisis / Duty to Warn / Mandated Report
<ul style="list-style-type: none">• Requests for program assistance (SECO, Non-Medical Counseling, Specialty Consultation, Health & Wellness, Financial Counseling, Tax Services, and/or Recovering Warrior), OR a request for information that will require additional research or	<ul style="list-style-type: none">• Program Referrals

Purpose of call	Refer to
time (such as assistance with child care or non-bulk fulfillment requests).	
<ul style="list-style-type: none">• Caller is following up regarding their pre-existing case	<ul style="list-style-type: none">• Adding a Contact Note to a Case

Quick Tracker

1. Go to the Search screen.

To access the Search screen click on SEARCH in the navigation bar at the top of the page from anywhere in the system.



Figure 4.1

2. Click on the Quick Tracker tab.

When clicked, the Quick Tracker drawer will slide out.

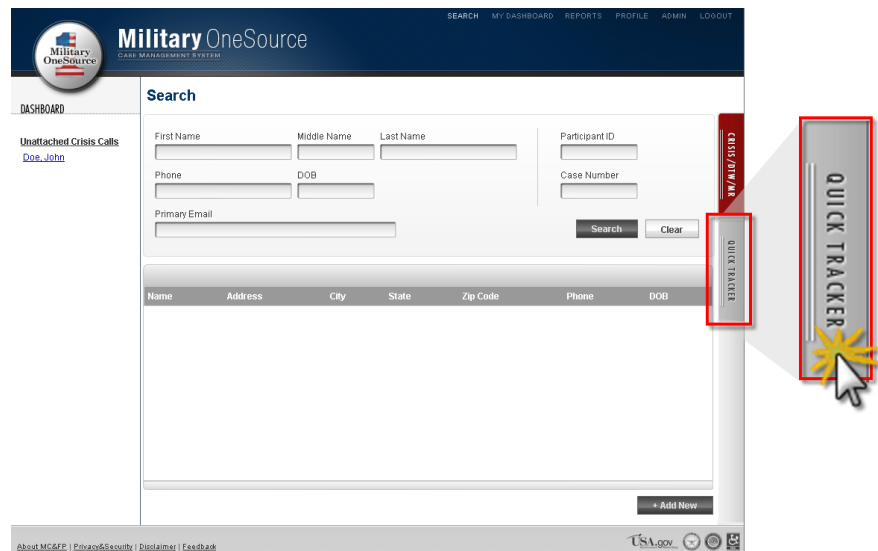


Figure 4.2

3. Select the applicable category/ies, and then click Done.

Your selected categories will be saved to the system and the drawer will close.

The counts for the selected Quick Tracker categories will be incremented by one (Figure 4.3).

No contact information is captured for Quick Tracker calls.

The Quick Tracker will reset the next time you open the drawer and all boxes display unchecked.

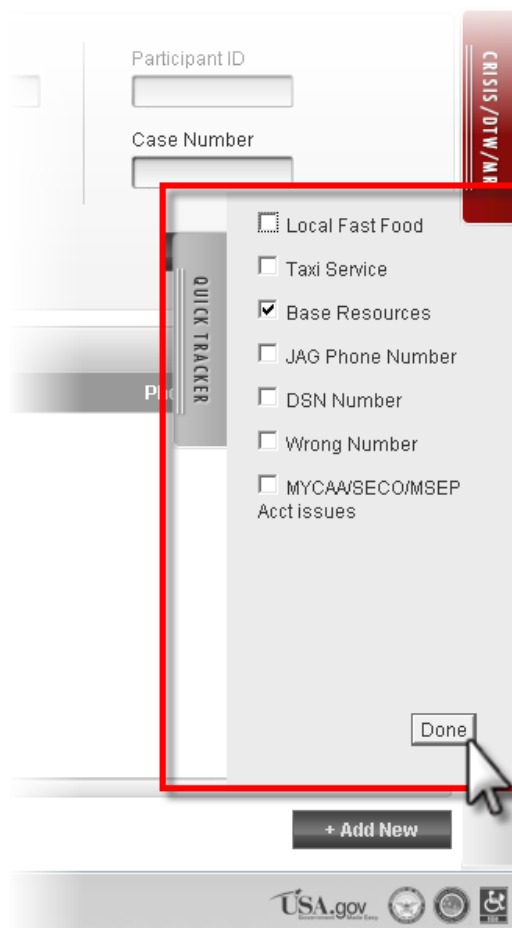


Figure 4.3

Working with Participant Records

The majority of activities you will be doing in the system will be interacting with the participants' records. This section will cover the most important actions with participant records:

- [Searching for a participant](#)
- [Viewing the participant's details and related cases](#)
- [Creating a new participant](#)
- [Editing a participant](#)

Search for a Participant

1. Go to the Search screen.

To access the Search screen click on **SEARCH** in the navigation bar at the top of the page from anywhere in the system.

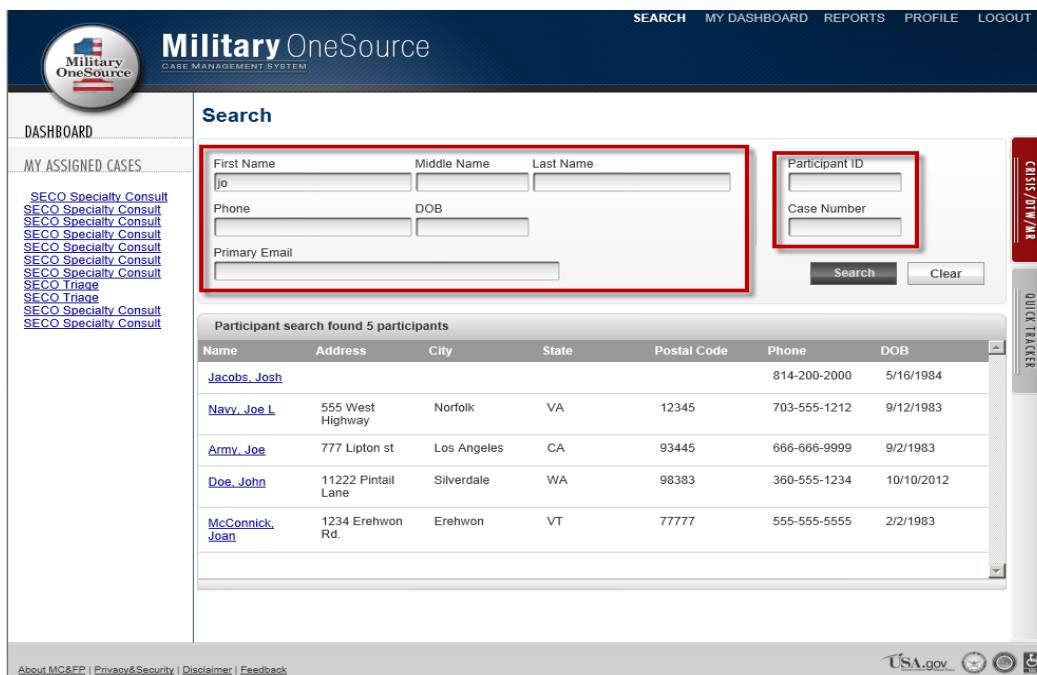


Figure 5.1

2. Enter criteria and click Search.

You have the choice of searching for the participant by their personal information, OR you can search by entering their Participant ID or Case Number in the system (if known). You can locate a participant by entering just a portion of their name as opposed to entering their entire name (Figure 5.2).

At least one search field must be populated in order to execute the search.

The image shows the search interface of the Military OneSource system. The top navigation bar includes 'SEARCH', 'MY DASHBOARD', 'REPORTS', 'PROFILE', and 'LOGOUT'. The main content area is titled 'Search' and contains several input fields: 'First Name' (with 'jo' entered), 'Middle Name', 'Last Name', 'Phone', 'DOB', and 'Primary Email'. To the right, there are fields for 'Participant ID' and 'Case Number'. A 'Search' button and a 'Clear' button are located below these fields. Below the search criteria, a table displays the results of the search, titled 'Participant search found 5 participants'. The table has columns for Name, Address, City, State, Postal Code, Phone, and DOB. The results are as follows:

Name	Address	City	State	Postal Code	Phone	DOB
Jacobs, Josh					814-200-2000	5/16/1984
Navy, Joe L	555 West Highway	Norfolk	VA	12345	703-555-1212	9/12/1983
Army, Joe	777 Lipton st	Los Angeles	CA	93445	666-666-9999	9/2/1983
Doe, John	11222 Pintail Lane	Silverdale	WA	98383	360-555-1234	10/10/2012
McConnick, Joan	1234 Erehwon Rd.	Erehwon	VT	77777	555-555-5555	2/2/1983

Figure 5.2

3. Select the participant.

Open the participant's record by clicking on their name.

The screenshot shows the Military OneSource Case Management System interface. At the top, there is a navigation bar with 'SEARCH', 'MY DASHBOARD', 'REPORTS', 'PROFILE', and 'LOGOUT'. Below this is a 'Search' section with input fields for 'First Name', 'Middle Name', 'Last Name', 'Phone', 'DOB', 'Participant ID', and 'Case Number'. A 'Search' button and a 'Clear' button are also present. Below the search fields, a table titled 'Participant search found 5 participants' displays the following data:

Name	Address	City	State	Postal Code	Phone	DOB
Jacobs, Josh					814-200-2000	5/16/1984
Navy, Joe L	555 West Highway	Norfolk	VA	12345	703-555-1212	9/12/1983
Army, Joe	777 Lipton st	Los Angeles	CA	93445	666-666-9999	9/2/1983
Doe, John	11222 Pintail Lane	Silverdale	WA	98383	360-555-1234	10/10/2012
McCormick, Joan	1234 Erehwon Rd.	Erehwon	VT	77777	555-555-5555	2/2/1983

The 'McCormick, Joan' entry is highlighted with a red box. The interface also includes a 'DASHBOARD' section on the left with 'MY ASSIGNED CASES' and a list of links, and a 'QUICK TRACKER' sidebar on the right. The footer contains 'About MO&FP | Privacy & Security | Disclaimer | Feedback' and the 'USA.gov' logo.

Figure 5.3

The participant's details page will appear (Figure 5.4).

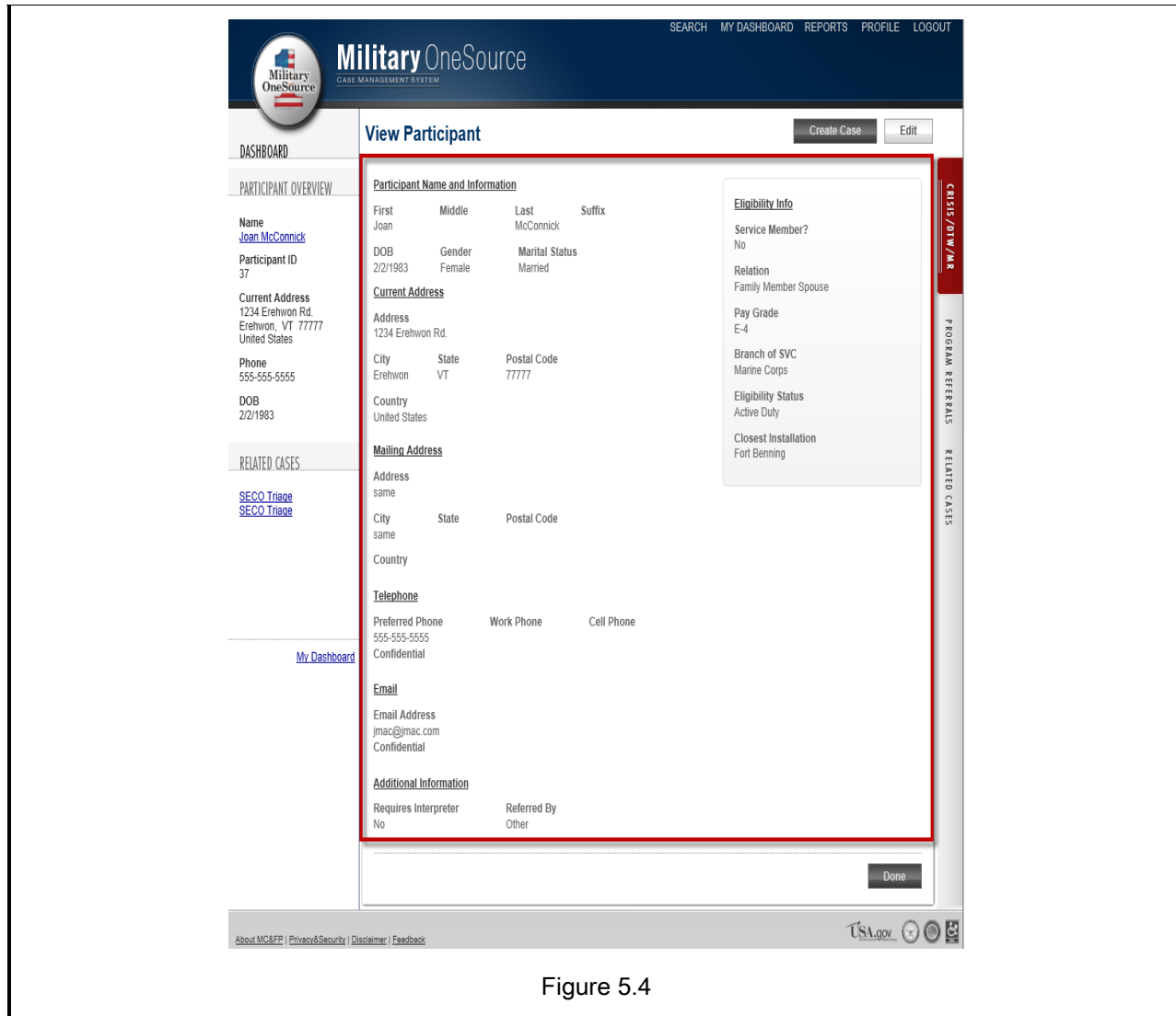


Figure 5.4

The Participant's Record Screen

4. Participant's Demographic Information

The center of the page contains the participant's personal and demographic details such as their contact and eligibility information (Figure 6.1). Click Edit to make changes to the participant's information.

Military OneSource
CARE MANAGEMENT SYSTEM

SEARCH PROFILE LOGOUT

View Participant Create Case Edit

Participant Name and Information

First	Middle	Last	Suffix
Jake	M	Smith	

DOB: 5/4/1980 Gender: Male Marital Status: Married

Current Address

Address: 456 Poplar Lane
City: Fredericksburg VA State: VA Postal Code: 22406
Country: United States

Mailing Address

Address: 3464 Nobel Drive
City: San Diego CA State: CA Postal Code: 92122
Country: United States

Telephone

Preferred Phone	Work Phone	Cell Phone
555-789-1658		

Email

Email Address: jakesmith@email.com

Additional Information

Requires Interpreter	Referred By
No	

Eligibility Info

Service Member? Yes
Relation: Self
Pay Grade: W-2
Branch of SVC: Air Force
Eligibility Status: Active Duty
Closest Installation: Fort Carson

Done

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Figure 6.1

5. Crisis / DTW / MR Tab

Clicking on the Crisis / DTW / MR will open the Crisis Call drawer with the participant's personal information defaulted (Figure 6.2 and Figure 6.3). See [Crisis / Duty to Warn / Mandated Report](#) for instructions for logging crisis calls.

Military OneSource CARE MANAGEMENT SYSTEM

SEARCH PROFILE LOGOUT

View Participant Create Case Edit

Participant Name and Information

First	Middle	Last	Suffix
Jake	M	Smith	

DOB: 5/4/1980 Gender: Male Marital Status: Married

Current Address

Address: 456 Poplar Lane
City: Fredericksburg VA State: VA Postal Code: 22406
Country: United States

Mailing Address

Address: 3464 Nobel Drive
City: San Diego CA State: CA Postal Code: 92122
Country: United States

Telephone

Preferred Phone: 555-789-1658 Work Phone: Cell Phone:

Email

Email Address: jakesmith@email.com

Additional Information

Requires Interpreter: No Referred By:

Eligibility Info

Service Member? Yes
Relation: Self
Pay Grade: W-2
Branch of SVC: Air Force
Eligibility Status: Active Duty
Closest Installation: Fort Carson

CRISIS/DIV/MR PROGRAM REFERRALS RELATED CASES

Done

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Figure 6.2

Military OneSource
CASE MANAGEMENT SYSTEM

SEARCH PROFILE LOGOUT

View Participant Create Case Edit

DASHBOARD

PARTICIPANT OVERVIEW

Name
[Jake M. Smith](#)

Participant ID
38

Current Address
456 Poplar Lane
Fredericksburg, VA 22406
United States

Phone
555-789-1658

DOB
5/4/1980

RELATED CASES

[Financial Counseling Adoption](#)

CRISIS /DTW/MR

Adverse Incident

GOV POC

Followed Internal Workflow

Crisis Call

Trace Call Required

Police

Base Police

EMS

MOS Triage Consultant

Followed internal workflow

Duty to Warn

Police

Base Police

EMS

Medical Facility

Followed internal workflow

Mandated Report

Adult Protective Services

Child Protective Services

Civilian Expeditionary Command

FAP (Installation Domestic Abuse, Child Abuse)

Followed internal work flow

Reserve Guard or Recruiting POC

First M Last
Jake M Smith

Home Phone DOB
555-789-1658 5/4/1980

Notes

POC Name POC Phone POC email

2nd POC Name 2nd POC Phone 2nd POC Email

3rd POC Name 3rd POC Phone 3rd POC email

Clear Save

jakesmith@email.com

Additional Information

Requires Interpreter Referred By
No

Done

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Figure 6.3

6. Program Referrals

Clicking on the Program Referrals tab will display the various programs that the participant can be referred to (Figure 6.4 and Figure 6.5). See the [Program Referrals](#) section of this document for instructions on creating program referrals.

Military OneSource
CARE MANAGEMENT SYSTEM

SEARCH PROFILE LOGOUT

View Participant Create Case Edit

DASHBOARD

PARTICIPANT OVERVIEW

Name
[Jake M Smith](#)

Participant ID
38

Current Address
456 Poplar Lane
Fredericksburg, VA 22406
United States

Phone
555-789-1658

DOB
5/4/1980

RELATED CASES

[Financial Counseling Adoption](#)

Participant Name and Information

First	Middle	Last	Suffix
Jake	M	Smith	

DOB 5/4/1980 **Gender** Male **Marital Status** Married

Current Address

Address
456 Poplar Lane

City	State	Postal Code
Fredericksburg	VA	22406

Country
United States

Mailing Address

Address
3464 Nobel Drive

City	State	Postal Code
San Diego	CA	92122

Country
United States

Telephone

Preferred Phone	Work Phone	Cell Phone
555-789-1658		

Email

Email Address
jakesmith@email.com

Additional Information

Requires Interpreter	Referred By
No	

Eligibility Info

Service Member?
Yes

Relation
Self

Pay Grade
W-2

Branch of SVC
Air Force

Eligibility Status
Active Duty

Closest Installation
Fort Carson

CRISIS / OI / W / R

PROGRAM REFERRALS

RELATED CASES

Done

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Figure 6.4

Military OneSource
CASE MANAGEMENT SYSTEM

SEARCH PROFILE LOGOUT

Financial Non-Medical **SECO** Info & Referrals Tax Specialty Health & Wellness Recovering Warrior Document Translation

DASHBOARD

PARTICIPANT OVERVIEW

View Participant [Cancel] [Edit]

Participant Name and Information

First	Middle	Last	Suffix
Jake	M	Smith	
DOB	Gender	Marital Status	
5/4/1980	Male	Married	

Current Address

Address: 456 Poplar Lane
City: Fredericksburg VA Postal Code: 22406
Country: United States

Mailing Address

Address: 3464 Nobel Drive
City: State Postal Code

Eligibility Info

Service Member? Yes
Relation: Self
Pay Grade: W-2
Branch of SVC: Air Force
Eligibility Status: Active Duty
Closest Installation: Fort Carson

CRISIS/DTW/MR
PROGRAM REFERRALS
RELATED CASES

Figure 6.5

7. Related Cases

The Related Cases section displays the participant's most recent active cases (up to five).

Military OneSource
CASE MANAGEMENT SYSTEM

DASHBOARD

PARTICIPANT OVERVIEW

View Participant

Participant Name and Information

First	Middle	Last	Suffix
Jake	M	Smith	
DOB	Gender	Marital Status	
5/4/1980	Male	Married	

Current Address

Address: 456 Poplar Lane
City: Fredericksburg VA Postal Code: 22406
Country: United States

Mailing Address

Address: 3464 Nobel Drive
City: State Postal Code: 92122
Country: United States

RELATED CASES

- [SECO Triage](#)
- [SECO Triage](#)
- [SECO Specialty Consult](#)
- [SECO Specialty Consult](#)
- [More](#)

Figure 6.6

To view all of a participant's cases, click on the Related Cases tab.

The screenshot displays the 'View Participant' interface in the Military OneSource Case Management System. The page is divided into several sections:

- Participant Overview:** Includes Name (Jake M. Smith), Participant ID (38), Current Address (456 Poplar Lane, Fredericksburg, VA 22406), Phone (555-789-1658), and DOB (5/4/1980).
- Participant Name and Information:** Lists First (Jake), Middle (M), Last (Smith), and Suffix. It also includes DOB (5/4/1980), Gender (Male), and Marital Status (Married).
- Current Address:** Address (456 Poplar Lane), City (Fredericksburg), State (VA), and Postal Code (22406).
- Mailing Address:** Address (3464 Nobel Drive), City (San Diego), State (CA), and Postal Code (92122).
- Telephone:** Preferred Phone (555-789-1658), Work Phone, and Cell Phone.
- Email:** Email Address (jakesmith@email.com).
- Additional Information:** Requires Interpreter (No) and Referred By.
- Eligibility Info:** Service Member? (Yes), Relation (Self), Pay Grade (W-2), Branch of SVC (Air Force), Eligibility Status (Active Duty), and Closest Installation (Fort Carson).
- RELATED CASES:** A section on the left with links for Financial Counseling and Adoption.
- Navigation:** A vertical menu on the right includes 'RELATED CASES' (highlighted with a red box), PROGRAM DETAILS, and CRISIS/OW/WR. Buttons for 'Create Case' and 'Edit' are at the top right.

Figure 6.7

Clicking on a case will display its details (Figure 6.8 and 6.9).

Military OneSource
CASE MANAGEMENT SYSTEM

SEARCH PROFILE LOGOUT

Related Cases

Case Id	Case Name	Date Opened	Date Modified	Status
288	Specialty Consult: Adoption	1/11/2013	1/11/2013 11:34:29 AM	Active
289	Financial Counseling	1/11/2013	1/11/2013 11:35:42 AM	Active
291	SECO Triage	1/14/2013	4/15/2013 1:25:53 PM	Closed
293	SECO Specialty Consult	1/14/2013	1/18/2013 1:47:25 PM	Active
294	Specialty Consult: Bulk Fulfillment	1/14/2013	1/14/2013 1:10:46 PM	Active
295	SECO Specialty Consult	1/18/2013	1/18/2013 1:47:25 PM	Active
298	SECO Triage	1/29/2013	1/31/2013 9:37:07 AM	Closed
302	SECO Triage	1/29/2013	1/29/2013 1:20:49 PM	Closed
303	SECO Specialty Consult	1/29/2013	1/29/2013 1:20:48 PM	Active
324	Health & Wellness Coaching	2/4/2013	2/4/2013 8:13:14 AM	Active
390	SECO Triage	2/28/2013	2/28/2013 2:06:49 PM	Closed
432	SECO Triage	4/8/2013	4/8/2013 5:15:56 AM	Active
440	SECO Triage	4/15/2013	4/18/2013 8:21:29 AM	Closed
579	SECO Triage	4/19/2013	4/19/2013 8:59:30 AM	Active
581	SECO Triage	4/19/2013	4/19/2013 8:59:39 AM	Active

Done

Participant Overview:
Name: [Jake M Smith](#)
Participant ID: 38
Current Address: 456 Poplar Lane, Fredericksburg, VA 22406, United States
Phone: 555-789-1657
DOB: 5/4/1980

Related Cases:
[SECO Triage](#)
[SECO Triage](#)
[SECO Specialty Consult](#)
[SECO Triage](#)
[SECO Specialty Consult](#)
[More](#)

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Figure 6.8

Military OneSource
CARE MANAGEMENT SYSTEM

SEARCH PROFILE LOGOUT

SECO Triage Case ID: 291 (Closed)

DASHBOARD

PARTICIPANT OVERVIEW

Name
[Jake M. Smith](#)

Participant ID
38

Current Address
456 Poplar Lane
Fredericksburg, VA 22406
United States

Phone
555-789-1657

DOB
5/4/1980

RELATED CASES

[SECO Triage](#)
[SECO Triage](#)
[SECO Specialty Consult](#)
[SECO Triage](#)
[SECO Specialty Consult](#)
[More](#)

Handoff Type Warm Handoff **Assigned to** Seco Advisor **Urgent** No

Interpreter Requested
No

Handoff Notes

Date and Time of Call: Monday, January 14, 2013 12:46 PM

Contact Notes [add](#)

▶ 1 Seco Advisor 4/15/2013 1:25:53 PM

Participant Information

Service Member Name Road Runner MyCAA Eligible

SECO I&R

Categories Career Connection
Career Exploration
Education and Training

Tech Help Provided For

Referred To

Comments

SECO Specialty Consult Case ID: 293

Handoff Type Warm Handoff **Assigned to** Seco Consultant

Follow Up Date **Follow Up Time** **Follow Up Reason**

Handoff Notes

Done

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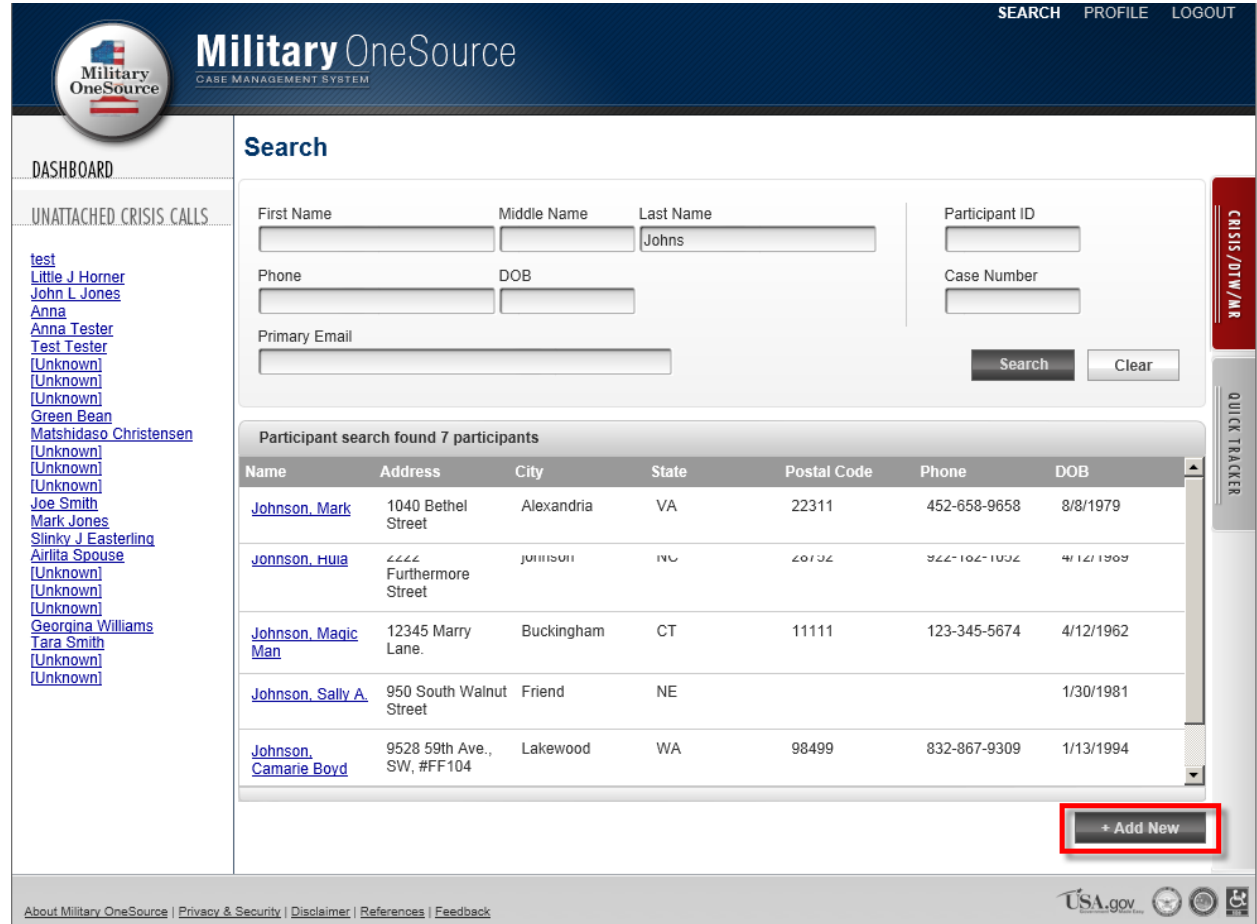
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Figure 6.9

Creating a Participant Record

Before you can create a new participant, the system will require you to first search for the person to verify that they don't already have a record. Once you have performed a search, the Add New button on the search page will appear (Figure 7.1).

1. After verifying that the participant doesn't already exist on the search page, click Add New.



The screenshot shows the Military OneSource search interface. At the top, there is a navigation bar with 'SEARCH', 'PROFILE', and 'LOGOUT' links. The main header features the Military OneSource logo and the text 'Military OneSource CARE MANAGEMENT SYSTEM'. On the left side, there is a 'DASHBOARD' section with a link to 'UNATTACHED CRISIS CALLS' and a list of names including 'test', 'Little J Horner', 'John L Jones', 'Anna', 'Anna Tester', 'Test Tester', and several '[Unknown]' entries. The main content area is titled 'Search' and contains several input fields: 'First Name', 'Middle Name', 'Last Name' (with 'Johns' entered), 'Participant ID', 'Phone', 'DOB', 'Case Number', and 'Primary Email'. There are 'Search' and 'Clear' buttons. Below the search fields, a message states 'Participant search found 7 participants'. A table displays the search results with columns for Name, Address, City, State, Postal Code, Phone, and DOB. The table lists five participants: Johnson, Mark; Johnson, Huia; Johnson, Magic Man; Johnson, Sally A.; and Johnson, Camarie Boyd. At the bottom right of the search results, a '+ Add New' button is highlighted with a red box. The footer contains links for 'About Military OneSource', 'Privacy & Security', 'Disclaimer', 'References', and 'Feedback', along with the USA.gov logo and other icons.

Name	Address	City	State	Postal Code	Phone	DOB
Johnson, Mark	1040 Bethel Street	Alexandria	VA	22311	452-658-9658	8/8/1979
Johnson, Huia	2222 Furthemore Street	JOHNSON	NC	28132	922-102-1032	4/12/1969
Johnson, Magic Man	12345 Marry Lane.	Buckingham	CT	11111	123-345-5674	4/12/1962
Johnson, Sally A.	950 South Walnut Street	Friend	NE			1/30/1981
Johnson, Camarie Boyd	9528 59th Ave., SW, #FF104	Lakewood	WA	98499	832-867-9309	1/13/1994

Figure 7.1

2. Enter the participant's information.

Required fields are designated by *

Begin by entering their personal information such as their name, date of birth, address(es), gender, marital status, and phone numbers and email address (Figure 7.2).

The **Confidential** checkboxes next to the phone and email address fields signify that the provided phone number/email address is private, and therefore safe for contacting the participant regarding private matters (Figure 7.2).

Military OneSource
CARE MANAGEMENT SYSTEM

SEARCH PROFILE LOGOUT

Create New Participant * indicates a required field

Personal Information:

- Name: First*, Middle, Last*, Suffix
- DOB*
- *Gender: Please Select
- *Marital Status: Please Select
- Current Address
- City, State, Postal Code, Country
- Mailing Address
- City, State, Postal Code, Country
- Preferred Phone Confidential
- Work Phone
- Cell Phone Confidential
- Email Address Confidential

Eligibility Information:

- Service Member?
 Yes
 No
- *Relation: Please Select
- *Branch of SVC: Please Select
- *Pay Grade: Please Select
- *Eligibility Status: Please Select
- Recovering Warrior
- Retiring Within 180 Days
- Discharged Within 180 Days
- Closest Installation: Enter an installation...

Referred By:

- Requires Interpreter: Please Select
- Referred By: Please Select
- Other Source: [Textbox]

Cancel Save Done

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Figure 7.2

Continue entering their personal information.

- If the participant requires interpretation assistance, select the **Requires Interpreter** checkbox and then select their language from the dropdown list (Figure 7.3).
- Select how the participant heard of or was referred to MOS in the **Referred By** list. If you select 'Other', type the referral source in the textbox (Figure 7.3).

Military OneSource
CARE MANAGEMENT SYSTEM

SEARCH PROFILE LOGOUT

Create New Participant * indicates a required field

Eligibility Information

Service Member?
 Yes
 No

*Relation
Please Select

*Branch of SVC
Please Select

*Pay Grade
Please Select

*Eligibility Status
Please Select

Recovering Warrior
 Retiring Within 180 Days
 Discharged Within 180 Days

Closest Installation
Enter an installation...

Requires Interpreter

Referred By
Please Select

Other Source

Cancel Save Done

USA.gov

Figure 7.3

Then, complete the eligibility information for the sponsor. Indicate if the sponsor is a Recovering Warrior or has an upcoming retirement by selecting the checkboxes (Figure 7.4).

Create New Participant * indicates a required field

Eligibility Information

Service Member?
 Yes
 No

*Relation
Please Select

*Branch of SVC
Please Select

*Pay Grade
Please Select

*Eligibility Status
Please Select

Recovering Warrior
 Retiring Within 180 Days
 Discharged Within 180 Days

Closest Installation
Enter an installation...

Cancel Save Done

Figure 7.4

3. Enter the participant's closest installation.

Begin by entering either the full name or partial name of the installation. Once the installation appears, click on its name. The installation name will then populate into the Closest Installation field (Figure 7.5).

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CASE MANAGEMENT SYSTEM

SEARCH PROFILE LOGOUT

Create New Participant * indicates a required field

Eligibility Information

Service Member?
 Yes
 No

*Relation
Please Select

*Branch of SVC
Please Select

*Pay Grade
Please Select

*Eligibility Status
Please Select

Recovering Warrior
 Retiring Within 180 Days
 Discharged Within 180 Days

Closest Installation
Enter an installation...
Fort
Please enter 1 or more characters

Cancel Save Done

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USA.gov

CRISIS / DTW / R

Figure 7.5

4. Click Done to save and close the participant's record.

The system will check to see if all required fields were entered and display any errors it finds (such as a phone number in an invalid format or leaving the email address blank).

You will need to fix the errors and click the Done button again until all errors have been resolved.

Then, the participant's record will be added to the system.

The screenshot shows the 'Create New Participant' form in the Military OneSource Case Management System. The form is divided into several sections: Name, Personal Information (DOB, Gender, Marital Status), Address (Current and Mailing), Phone Numbers (Preferred, Work, Cell), and Eligibility Information. The 'Done' button at the bottom right is highlighted with a red box. A vertical red bar on the right side of the form contains the text 'CRISIS/OTW/IR'. The footer of the page includes 'About, MC&FP, Privacy&Security, Disclaimer, Feedback' and the USA.gov logo.

Figure 7.6

Editing a Participant

1. Select the participant from the Search screen.

Click on the participant's name to open their record.

The screenshot shows the Military OneSource Search interface. The search criteria are: First Name: Joan, Middle Name: (empty), Last Name: (empty), Phone: (empty), DOB: (empty), Primary Email: (empty), Participant ID: (empty), Case Number: (empty). The search results table shows one participant:

Name	Address	City	State	Postal Code	Phone	DOB
McCormick, Joan	1234 Erewhon Rd.	Erewhon	VT	77777	555-555-5555	2/2/1983

Figure 8.1

2. Click Edit

The screenshot shows the Military OneSource View Participant interface. The participant information is displayed in a table format:

Participant Name and Information	Eligibility Info																								
<table border="1"><thead><tr><th>First</th><th>Middle</th><th>Last</th><th>Suffix</th></tr></thead><tbody><tr><td>Joan</td><td></td><td>McCormick</td><td></td></tr><tr><th>DOB</th><th>Gender</th><th>Marital Status</th><td></td></tr><tr><td>2/2/1983</td><td>Female</td><td>Married</td><td></td></tr></tbody></table>	First	Middle	Last	Suffix	Joan		McCormick		DOB	Gender	Marital Status		2/2/1983	Female	Married		<table border="1"><tbody><tr><td>Service Member?</td><td>No</td></tr><tr><td>Relation</td><td>Family Member Spouse</td></tr><tr><td>Pay Grade</td><td>E-4</td></tr><tr><td>Branch of SVC</td><td>Marine Corps</td></tr></tbody></table>	Service Member?	No	Relation	Family Member Spouse	Pay Grade	E-4	Branch of SVC	Marine Corps
First	Middle	Last	Suffix																						
Joan		McCormick																							
DOB	Gender	Marital Status																							
2/2/1983	Female	Married																							
Service Member?	No																								
Relation	Family Member Spouse																								
Pay Grade	E-4																								
Branch of SVC	Marine Corps																								

Figure 8.2

The participant's information will become editable (Figure 8.3).

3. Make the desired updates, and then click Done.

If the required information for the participant is complete, the system will save the updates.

If any errors display, correct the issue and then click Done again until all errors are corrected.

The screenshot shows the 'Edit Participant' interface in the Military OneSource CMS. The form is divided into several sections: 'PARTICIPANT OVERVIEW' on the left, 'Edit Participant' in the main area, and 'Eligibility Information' on the right. The 'Edit Participant' section includes fields for First, Middle, Last, and Suffix names; DOB, Gender, and Marital Status; Current and Mailing addresses; Preferred and Work Phone numbers; and Email Address. The 'Eligibility Information' section includes Service Member status, Relation, Branch of SVC, Pay Grade, Eligibility Status, and Closest Installation. A red box highlights the 'Done' button at the bottom right of the form.

Figure 8.3

Crisis / Duty to Warn / Mandated Report

Logging a call

When a crisis, duty to warn / mandated report, or adverse incident call (“crisis call”) comes in, the primary goal is to capture as much information as possible about the call. Then, you will attach the crisis call to the participant’s record in the system.

1. From anywhere in the system, click on the red CRISIS / DTW / MR tab.

The CRISIS / DTW / MR tab appears along the right-hand side of every page within the system.

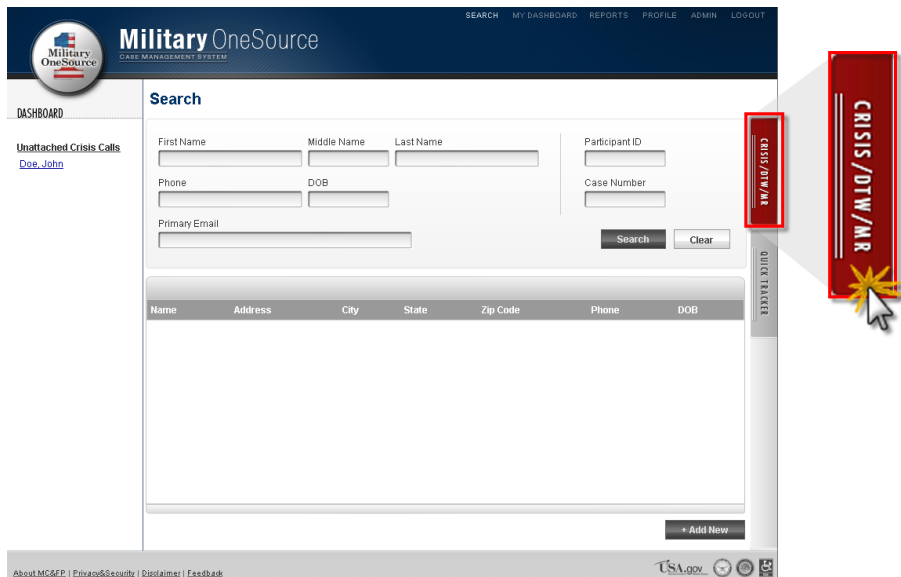


Figure 9.1

When clicked the drawer will slide out to the left.

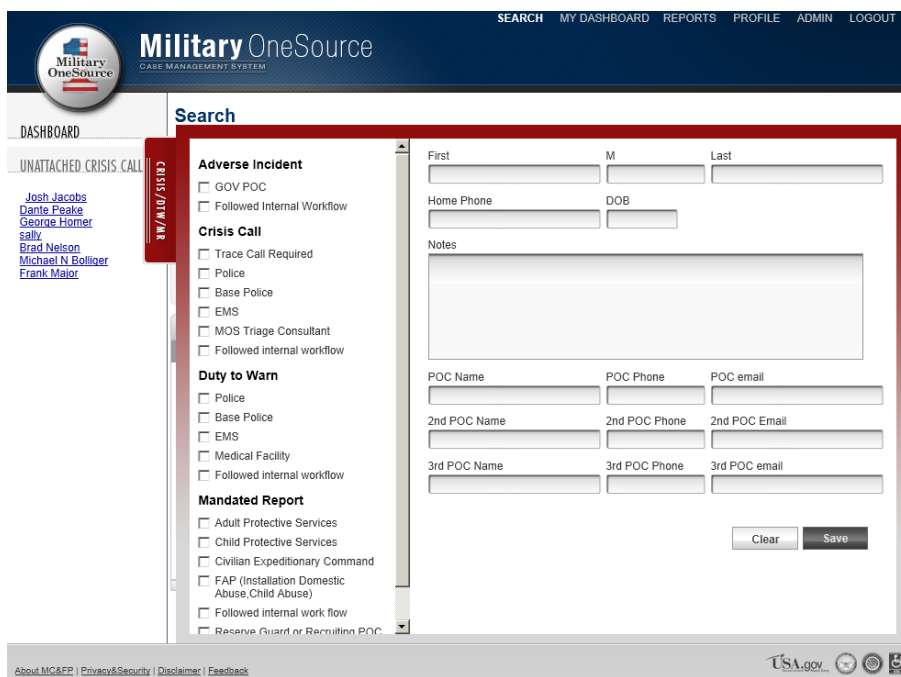


Figure 9.2

2. Enter any available information about the call.

Select the categories applicable to the nature of the call, and try to enter as much information as you can about the caller (Figure 9.3). If you opened the Crisis / DTW / MR drawer from a participant's screen,

their information will default in the form. You can clear or update the caller's information if needed. Add a summary of the issue and any relevant notes in the Notes textbox.

Finally, enter the names, phone numbers, and email addresses of any points of contact for the incident, if available.

The screenshot shows a web form for entering incident information. On the left is a vertical sidebar with a red header containing the text 'CRISIS/DTW/M/R'. The sidebar lists several categories of incidents with checkboxes: 'Adverse Incident' (GOV POC, Followed Internal Workflow), 'Crisis Call' (Trace Call Required, Police, Base Police, EMS, MOS Triage Consultant, Followed internal workflow), 'Duty to Warn' (Police, Base Police, EMS, Medical Facility, Followed internal workflow), and 'Mandated Report' (Adult Protective Services, Child Protective Services, Civilian Expeditionary Command, FAP (Installation Domestic Abuse, Child Abuse), Followed internal work flow, Reserve Guard or Recruiting POC). The main form area contains input fields for 'First', 'M', and 'Last' names; 'Home Phone' and 'DOB'; a large 'Notes' text area; and three rows of contact information labeled '1st POC', '2nd POC', and '3rd POC', each with fields for 'Name', 'Phone', and 'email'. At the bottom right of the form are 'Clear' and 'Save' buttons.

Figure 9.3

3. Click Save

When you have entered all available information for the call, click the **Save** button (Figure 9.4). The drawer will close and the crisis call will be saved in the system.



Figure 9.4

The next step will be to associate the crisis call to a participant's record. You can do that immediately after saving the call (see [Associating a Crisis / Duty to Warn / Mandated Report Call to a Participant's Record](#)), or you can postpone for a later time if needed by following the next steps.

Postpone Associating a Crisis Call to a Participant

The process for postponing a crisis call will be slightly different depending upon whether you were on the participant's screen or the search screen when you created the crisis call.

1. If you were on the participant's screen, click No to return to the search page. If you were already on the Search screen, skip to the next step.

If you were on the participant's screen when you created the crisis call, a banner will display at the top of the page asking if you would like to attach the call to the current participant. Click **No**. The search screen will then display.

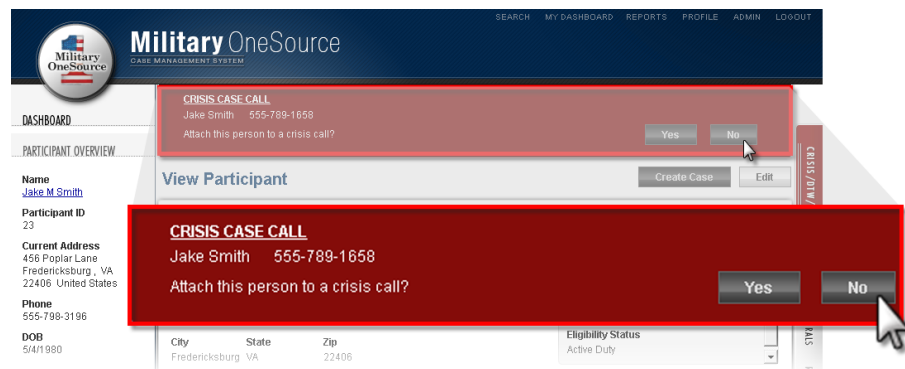


Figure 10.1

2. Click Not Now in the search screen banner

Click **Not Now** in the banner at the top of the search screen (Figure 10.2).

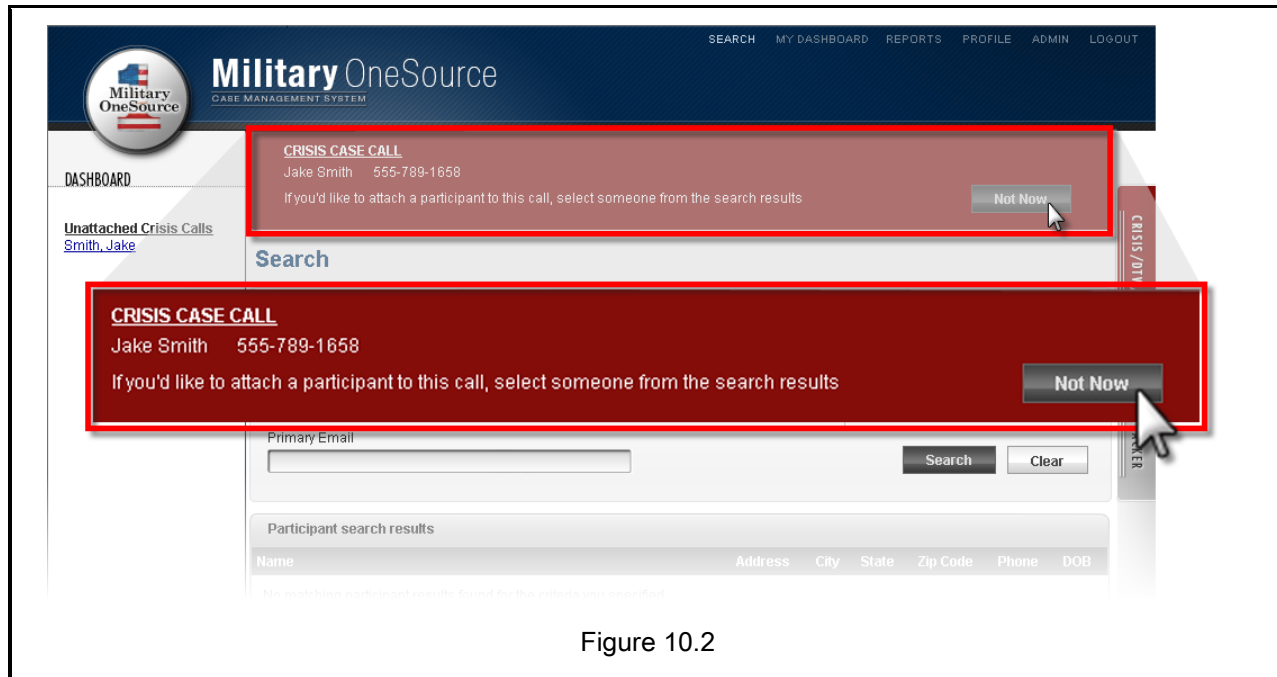


Figure 10.2

The crisis call will display in the Unattached Crisis Calls dashboard on the search page until the call can be attached to a participant's record.



Figure 10.3

Clicking on the link in the dashboard will bring you to the details page for that call (Figure 10.4). Click **Done** to exit the page, or click **Attach** when you are ready to associate the crisis call to a

participant's record. See [Associating a Crisis / Duty to Warn / Mandated Report Call to a Participant's Record](#) for instructions.

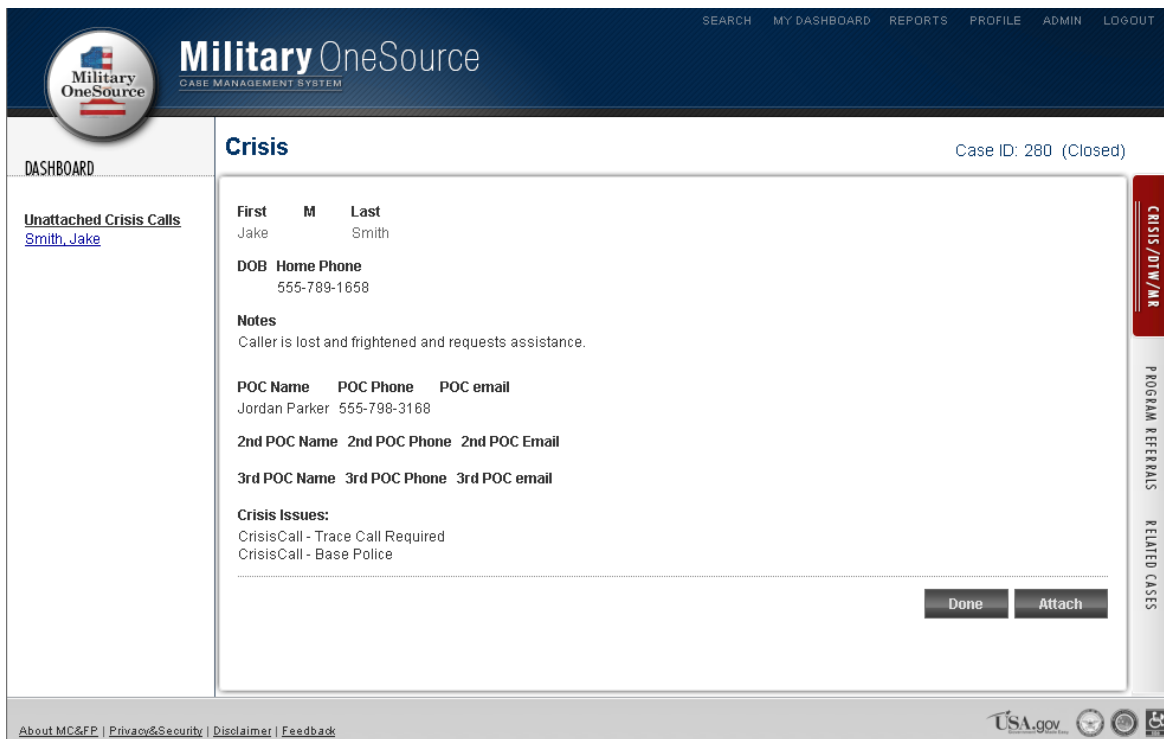


Figure 10.4

Associating a Crisis / Duty to Warn / Mandated Report Call to a Participant's Record

When the crisis call is saved, the CRISIS / DTW / MR drawer will close. The system will then ask if you would like to associate the call to a participant's record. Depending on which page you were on when you clicked on the CRISIS / DTW / MR tab, there will be a couple of different ways to do this:

- If you clicked on the CRISIS / DTW / MR tab from a participant's page, skip to [Step 4 below](#).
- If you were on the search page, continue with the following steps.

1. Associating a crisis call to a participant from the search screen

If you were on the Search page when you clicked on the CRISIS / DTW / MR tab, you will now see the caller's name (if entered) displaying in the Unattached Crisis Calls Dashboard on the left-hand side of the screen.

The caller's name will remain in the dashboard until they are associated to a participant's record (Figure 11.1).

To associate the call to a participant, first check to see if the participant already exists (Figure 11.2).



Figure 11.1

2. Search for the participant.

The system will automatically execute a search using information about the caller if provided. If no records are returned at first you may need to update/remove some of the prepopulated information (such as the phone number) and re-execute the search in order to correctly determine if the caller already has a participant's record or not (Figure 11.2).

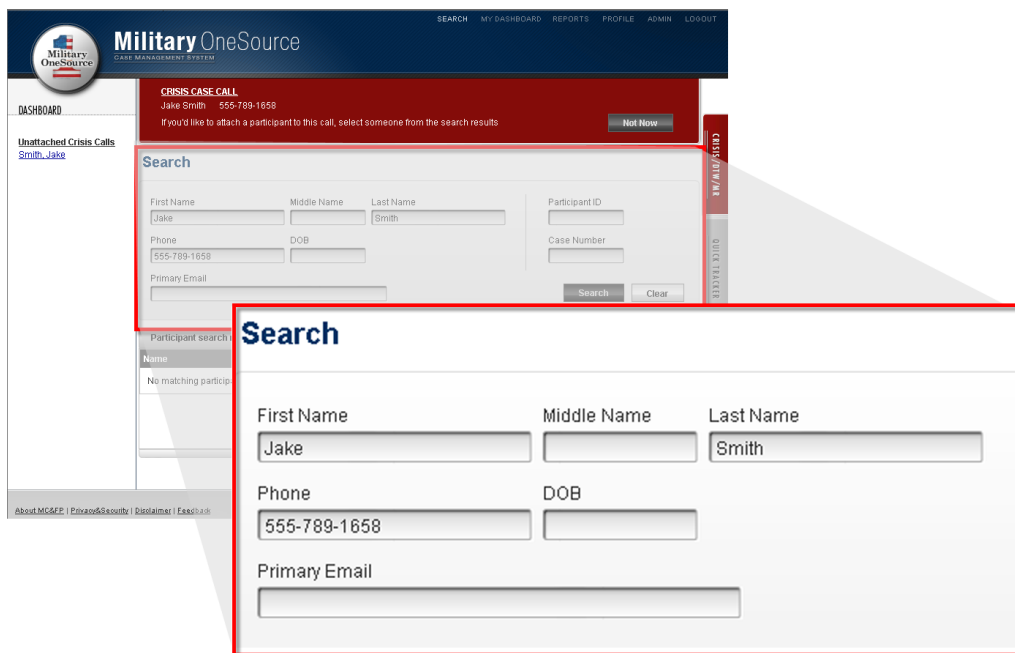


Figure 11.2

3. If the participant is found, select them from the search results. Otherwise, you will need to create the participant's record in the system. See [Associating a Crisis Call to a New Participant](#) for instructions.

If the participant is found in the system, select their record in the search results by clicking on their name.

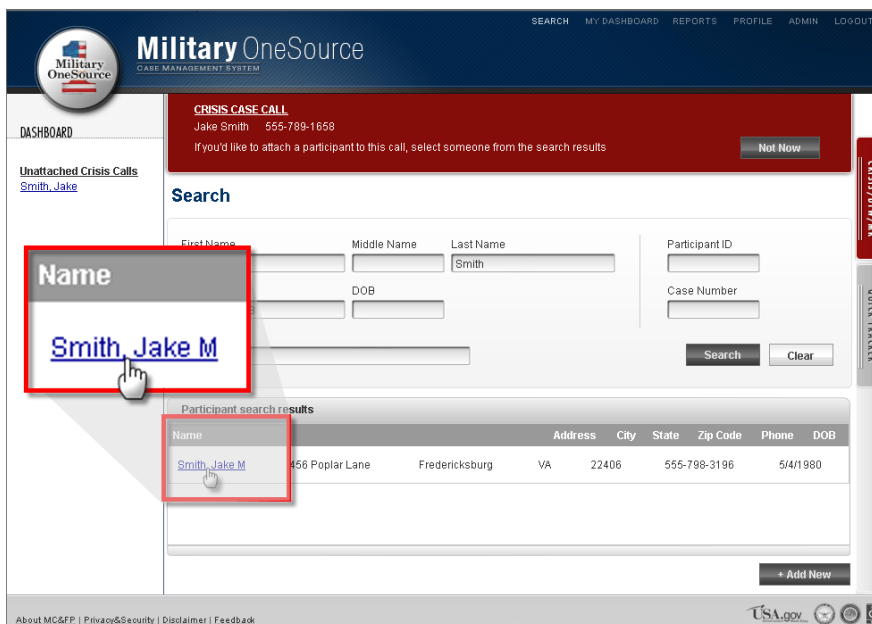


Figure 11.3

4. Click Yes to attach the crisis call to the participant.

The participant's details page will display. Click **Yes** at the top of the page to associate the call to that participant.

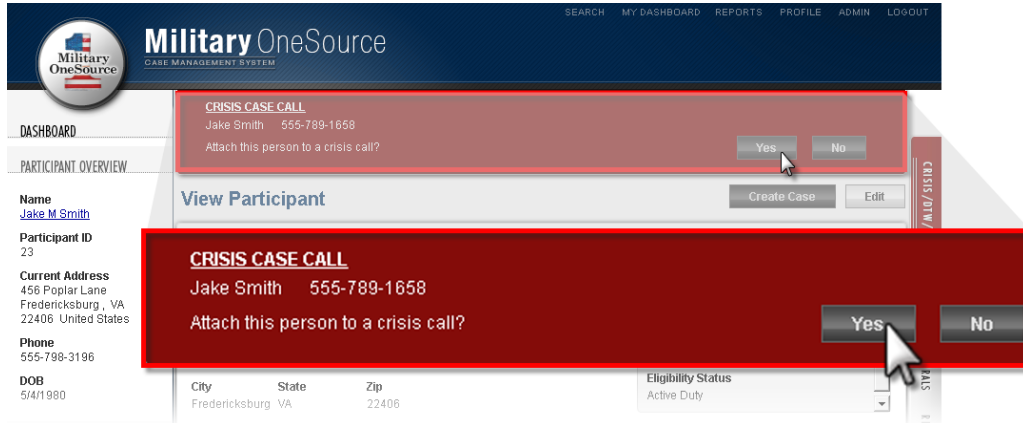


Figure 11.4

Once the call is associated to the participant's record it will appear among that participant's Related Cases.



Figure 11.5

Associating a Crisis Call to a New Participant

1. Click Add New on the search screen

If you were not able to locate the participant's record on the search page, the participant will need to be added to the system.

Click the Add New button at the bottom of the page. This button will only appear after a search has been completed.

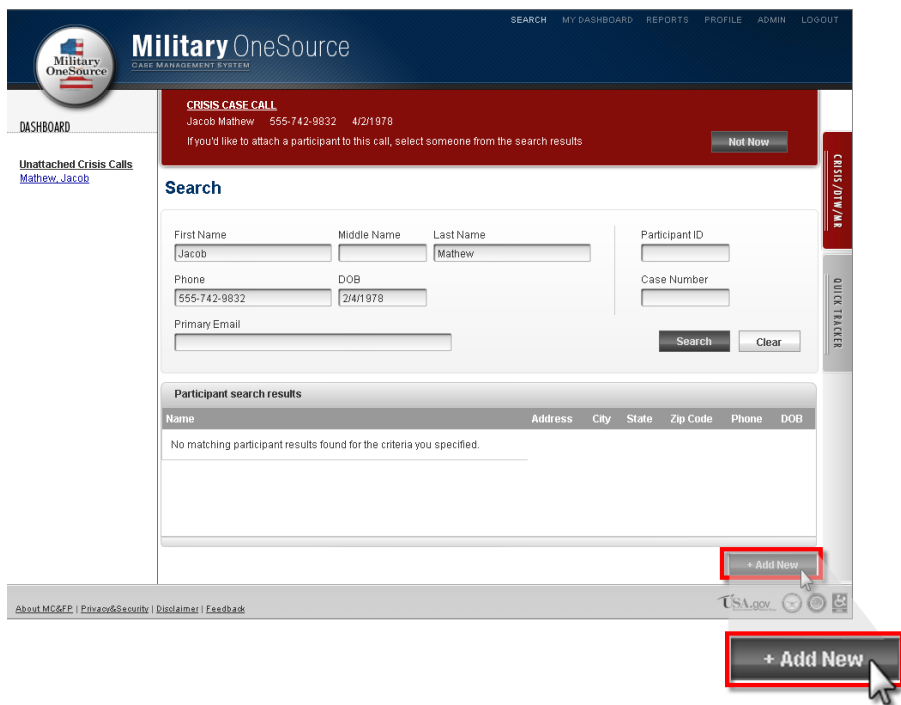


Figure 12.1

2. Enter participant's information, and then click Done

For guidance in creating a new participant's record, see [Creating a Participant Record](#).

CRISIS CASE CALL
Jacob Mathew 555-742-9832 4/2/1978
If you'd like to attach a participant to this call, select someone from the search results [Not Now](#)

Create New Participant

* indicates a required field

Name
First* Middle Last* Suffix
DOB* Gender* Marital Status
Current Address
City State Postal Code Country
Mailing Address
City State Postal Code Country
Preferred Phone Confidential
Work Phone
Cell Phone Confidential
Email Address Confidential Requires Interpreter Referred By
Other Source

Eligibility Information
Service Member?
 Yes
 No
*Relation
*Branch of SVC
*Pay Grade
*Eligibility Status
 Recovering Warrior
 Retiring Within 180 Days
 Discharged Within 180 Days
Closest Installation
Enter an installation...

[Cancel](#) [Save](#) [Done](#)

Figure 12.2

3. Click Yes in the Crisis Case Call banner

CRISIS CASE CALL
Jacob Mathew 555-742-9832 4/2/1978
Attach this person to a crisis call? [Yes](#) [No](#)

View Participant

CRISIS CASE CALL
Jacob Mathew 555-742-9832 4/2/1978
Attach this person to a crisis call? [Yes](#) [No](#)

City State Zip Eligibility Status
Fredericksburg VA 22406 Active Duty

Figure 12.3

The crisis call will now be associated to the participant's record. You can view the crisis call in the participant's Related Cases.

Military OneSource
CASE MANAGEMENT SYSTEM

SEARCH MY DASHBOARD REPORTS PROFILE ADMIN LOGOUT

Related Cases

Case Id	Case Name	Date Opened	Date Modified	Status
267	Crisis	8/3/2012	8/3/2012 10:36:07 AM	Closed

Participant Overview:
Name: [Jacob Mathew](#)
Participant ID: 24
Current Address: 798 Palm Avenue, San Diego, CA 92122, United States
Phone: 555-742-9832
DOB: 4/21/1978

Related Cases:

Case Id	Case Name	Date Opened	Date Modified	Status
267	Crisis	8/3/2012	8/3/2012 10:36:07 AM	Closed

CRISIS/OTW/WR PROGRAM REFERRALS RELATED CASES

Figure 12.4

Program Referrals

1. Open the participant's record

Locate the participant on the search screen (see [Search for a Participant](#)) and click on their name to open their record.

The screenshot displays the Military OneSource search interface. The top navigation bar includes 'SEARCH', 'PROFILE', and 'LOGOUT'. The main search area contains fields for 'First Name', 'Middle Name', 'Last Name', 'Participant ID', 'Phone', 'DOB', and 'Case Number'. A 'Search' button is located below these fields. On the left side, there is a 'DASHBOARD' section with a list of names, including 'test', 'Lillie J. Homer', 'John L. Jones', 'Anna', 'Anna Tester', 'Test Tester', and several '(Unknown)' entries. The search results section, titled 'Participant search found 9 participants', contains a table with the following data:

Name	Address	City	State	Postal Code	Phone	DOB
Smith, Jake M	456 Poplar Lane	Fredericksburg	VA	22406	555-789-1657	5/4/1980
Smith, Michael	256 Clark Street	Alexandria	VA	22311	456-154-2154	8/8/1978
Smith, Leslie	5 Smith Way	Hampton	VA	23669	757-888-8888	4/25/1986
Smith, Willow	123 Hawthorne Place	Fort Hood	TX	12344	123-456-7890	4/15/2013
Smith, Megan						4/2/2013
Smith, Tasha	4613 Green Meadow St	Killeen	TX	76549	910-229-9973	6/23/1981

At the bottom of the search results, there is an 'Add New' button. The footer of the page includes 'About Military OneSource | Privacy & Security | Disclaimer | References | Feedback' and the USA.gov logo.

Figure 13.1

2. Click on the Create Case button.

The screenshot shows the 'View Participant' page in the Military OneSource Case Management System. At the top right, there are links for 'SEARCH', 'PROFILE', and 'LOGOUT'. The page title is 'View Participant' and the participant's name is 'Jake M. Smith'. A 'Create Case' button is highlighted with a red box, and an 'Edit' button is also visible. The page is divided into several sections:

- Participant Overview:** Name (Jake M. Smith), Participant ID (38), Current Address (456 Poplar Lane, Fredericksburg, VA 22406), Phone (555-789-1657), and DOB (5/4/1980).
- Participant Name and Information:** First (Jake), Middle (M), Last (Smith), Suffix, DOB (5/4/1980), Gender (Male), and Marital Status (Married).
- Current Address:** Address (456 Poplar Lane), City (Fredericksburg), State (VA), and Postal Code (22406).
- Mailing Address:** Address (3464 Nobel Drive), City (San Diego), State (CA), and Postal Code (92122).
- Eligibility Info:** Service Member? (Yes), Relation (Self), Pay Grade (W-2), Branch of SVC (Navy), Eligibility Status (Active Duty), and Closest Installation (Fort Carson).
- Telephone:** Preferred Phone (555-789-1657), Work Phone, and Cell Phone.
- Email:** Email Address (jakesmith@email.com).
- Additional Information:** Requires Interpreter (No) and Referred By (Website).

At the bottom right of the main content area, there is a 'Done' button. The footer contains links for 'About Military OneSource', 'Privacy & Security', 'Disclaimer', 'References', and 'Feedback', along with the USA.gov logo and other icons.

Figure 13.2

All the program referral case types will display at the top of the page (Figure 13.3).

3. Select the applicable case referral type.

If at any point the call turns into an emergency situation create a [Crisis Call](#) record.

Select **Non-Medical** to conduct an assessment on the participant and refer them to a Military and Family Life Counselor (MFLC) or a counselor within the MOS Network, or to another agency if you determine the participant to be outside the scope of non-medical counseling. See [Financial Counseling](#)

1. Select Financial.

Select **Financial** to select a referral type and enter in counseling information.

Financial Counseling

Referral Options (check all that apply)

<input type="checkbox"/> Auto Loan	<input type="checkbox"/> Estate Planning	<input type="checkbox"/> Identity Theft Recovery	<input type="checkbox"/> Savings
<input type="checkbox"/> Budgeting	<input type="checkbox"/> Financial Assistance	<input type="checkbox"/> Insurance	<input type="checkbox"/> Tax
<input type="checkbox"/> Consolidation	<input type="checkbox"/> Financial Hardship	<input type="checkbox"/> Investments	<input type="checkbox"/> TSP
<input type="checkbox"/> Consumer Rights	<input type="checkbox"/> Foreclosure	<input type="checkbox"/> Planning for Deployment	<input type="checkbox"/> Other
<input type="checkbox"/> Credit Cards	<input type="checkbox"/> Home Loan	<input type="checkbox"/> Purchasing a Home	
<input type="checkbox"/> Debt / Financial	<input type="checkbox"/> Identity Theft Information	<input type="checkbox"/> Refinance Loan	
<input type="checkbox"/> Education	<input type="checkbox"/> Identity Theft Prevention	<input type="checkbox"/> Retirement	

*Counseling Delivery
Please Select Participant prefers not to be contacted for follow-up

*Company *Counselor Name

Address

City State Postal Code Country

*Phone *Email

*Handoff Type Assigned to Interpreter Requested
Language

Handoff Notes

Urgent

[Cancel](#)

Figure 14.1

First, select all the Referral Options that apply. Next, use the drop down menu to select Counseling Delivery.

If the participant does not wish to be contacted for follow-up, please check the box next to “Participant prefers not to be contacted for follow-up.”

Next, fill in the Counseling information including the Company name, Counselor name, Address, Phone number, and email address.

Finally, select the Handoff Type and Assign to a particular case manager (if applicable).

Indicate if an interpreter was required in order to create the referral for the participant and select their language. Select the Urgent checkbox if the case came in during non-business hours. Then, click Done to close the referral.

Non-Medical Counseling for additional assistance with the Non-Medical Counseling Referral form.

Select **Info & Referrals** if the participant is requesting information that will require additional research or time that is not directly related to any of the other programs (such as assistance with child care or non-bulk fulfillment requests).

Select **Specialty** to refer the participant to a Specialty Consultant for assistance regarding special needs, elder care, education, adult disability, adoption, work life, or bulk fulfillment.

While entering the referral information, click the **Save** button to save the referral at any point, or click the **Done** button to save and close the referral.

The screenshot displays the Military OneSource Case Management System interface. At the top, there is a navigation bar with the Military OneSource logo and the text 'CASE MANAGEMENT SYSTEM'. Below this, a series of navigation tabs are visible: Financial, Non-Medical, SECO, Info & Referrals, Tax, Specialty, Health & Wellness, Recovering Warrior, and Document Translation. A red box highlights these tabs. The main content area is titled 'View Participant' and includes a 'Cancel' and 'Edit' button. The participant's information is displayed in several sections: 'Participant Name and Information' (First: Jake, Middle: M, Last: Smith, Suffix:), 'Current Address' (Address: 456 Poplar Lane, City: Fredericksburg, VA, State: VA, Postal Code: 22406, Country: United States), and 'Eligibility Info' (Service Member?: Yes, Relation: Self, Pay Grade: W-2, Branch of SVC: Navy, Eligibility Status: Active Duty, Closest Installation: Fort Carson). A sidebar on the left contains 'PARTICIPANT OVERVIEW' and 'RELATED CASES' (listing SECO Triage and SECO Specialty Consult). A vertical sidebar on the right contains 'CRISIS /DTW/AR', 'PROGRAM REFERRALS', and 'RELATED CASES'.

Figure 13.3

2. Enter information about the nature of the referral. (Not applicable for referrals to SECO)

The process for entering referral information will be similar across most of the case referral types, but they

all will collect different information specific to their type. Non-Medical Counseling and Document Translation requires additional information compared to the other case types, so refer to the [Financial Counseling](#)

3. Select Financial.

Select **Financial** to select a referral type and enter in counseling information.

Financial Counseling

Referral Options (check all that apply)

<input type="checkbox"/> Auto Loan	<input type="checkbox"/> Estate Planning	<input type="checkbox"/> Identity Theft Recovery	<input type="checkbox"/> Savings
<input type="checkbox"/> Budgeting	<input type="checkbox"/> Financial Assistance	<input type="checkbox"/> Insurance	<input type="checkbox"/> Tax
<input type="checkbox"/> Consolidation	<input type="checkbox"/> Financial Hardship	<input type="checkbox"/> Investments	<input type="checkbox"/> TSP
<input type="checkbox"/> Consumer Rights	<input type="checkbox"/> Foreclosure	<input type="checkbox"/> Planning for Deployment	<input type="checkbox"/> Other
<input type="checkbox"/> Credit Cards	<input type="checkbox"/> Home Loan	<input type="checkbox"/> Purchasing a Home	
<input type="checkbox"/> Debt / Financial	<input type="checkbox"/> Identity Theft Information	<input type="checkbox"/> Refinance Loan	
<input type="checkbox"/> Education	<input type="checkbox"/> Identity Theft Prevention	<input type="checkbox"/> Retirement	

*Counseling Delivery
Please Select Participant prefers not to be contacted for follow-up

*Company *Counselor Name

Address

City State Postal Code Country

*Phone *Email

*Handoff Type Assigned to Interpreter Requested Language

Handoff Notes

Urgent

[Cancel](#)

Figure 14.1

First, select all the Referral Options that apply. Next, use the drop down menu to select Counseling

Delivery.

If the participant does not wish to be contacted for follow-up, please check the box next to “Participant prefers not to be contacted for follow-up.”

Next, fill in the Counseling information including the Company name, Counselor name, Address, Phone number, and email address.

Finally, select the Handoff Type and Assign to a particular case manager (if applicable).

Indicate if an interpreter was required in order to create the referral for the participant and select their language. Select the Urgent checkbox if the case came in during non-business hours. Then, click Done to close the referral.

Non-Medical Counseling and [Document Translation](#) sections for specific instructions with completing these referrals.

Begin by entering additional information regarding the participant’s referral in the fields provided.

Referrals to SECO will not require any additional information aside from the handoff fields—skip to [step 5 below](#).

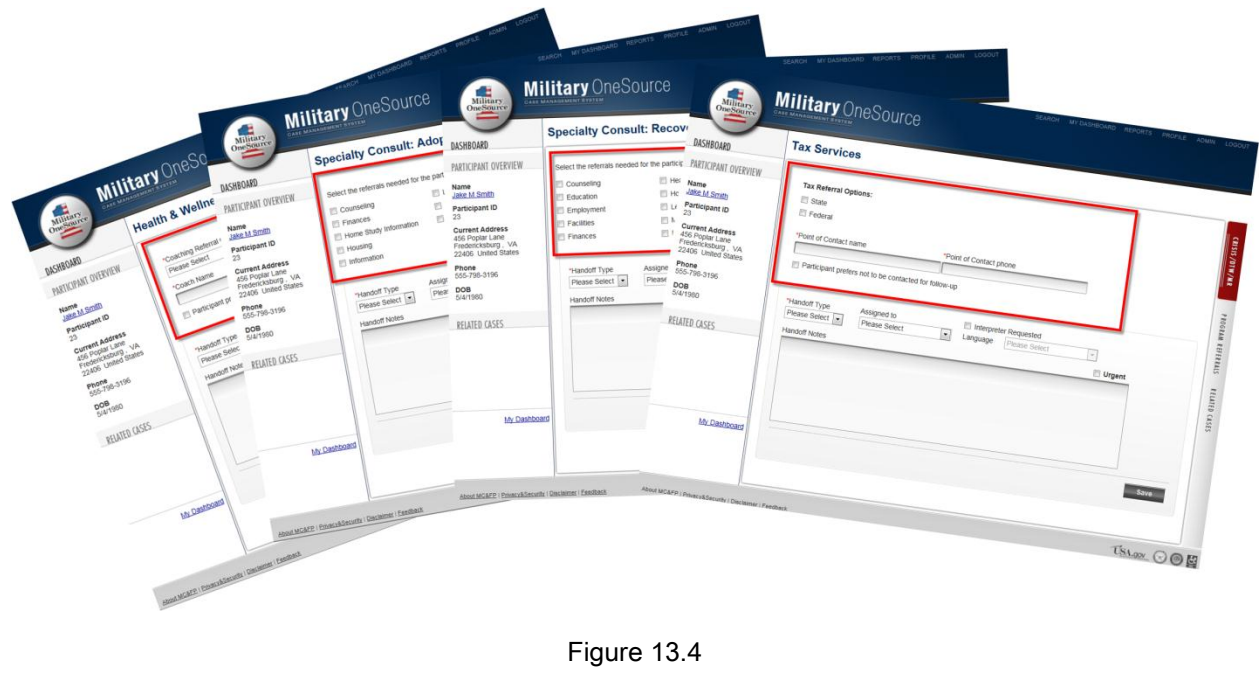


Figure 13.4

4. Indicate if the participant does not want a followed-up.

If the participant does not want to be followed up with by a case manager regarding their progress with a Health & Wellness, Financial Consulting, or Non-Medical Counseling case, select the checkbox.

The screenshot displays the Military OneSource CMS interface for a participant's profile. On the left, there is a sidebar with the following information: Participant ID 23, Current Address (456 Poplar Lane, Fredericksburg, VA 22406, United States), Phone (555-798-3196), and DOB (5/4/1980). Below this is a 'RELATED CASES' section and a 'My Dashboard' link. The main content area shows a form for handoff details. At the top, there is a 'Federal' checkbox. Below that are two input fields for '*Point of Contact name' and '*Point of Contact phone'. A red box highlights the checkbox labeled 'Participant prefers not to be contacted for follow-up'. Below this are several dropdown menus: '*Handoff Type' (Please Select), 'Assigned to' (Please Select), 'Interpreter Requested' (checkbox), and 'Language' (Please Select). There is also an 'Urgent' checkbox. A large text area for 'Handoff Notes' is present. At the bottom right of the form are 'Cancel', 'Save', and 'Done' buttons. The footer of the page includes 'About MG&FP | Privacy&Security | Disclaimer | Feedback' and the USA.gov logo.

Figure 13.5

5. Enter Handoff details.

Then, enter information about the handoff. The Handoff and Assigned to fields will not display for all referral types (Figure 13.6).

If you performed a warm handoff between the receiving case manager and the participant, select 'Warm Handoff' from the **Handoff Type** and then select the name of the case manager in the **Assigned to** list. Otherwise, select 'Left Voicemail'. If you would prefer a supervisor to assign the case to one of the case managers leave the **Assigned to** field set to 'Please Select'. The referral will appear in the supervisor's queue for them to delegate to their team (Figure 13.6).

Enter details about the handoff in the Handoff Notes textbox.

23

Current Address
456 Poplar Lane
Fredericksburg, VA
22406 United States

Phone
555-798-3196

DOB
5/4/1980

RELATED CASES

[My Dashboard](#)

*Point of Contact name *Point of Contact phone

Participant prefers not to be contacted for follow-up

*Handoff Type Assigned to
Please Select Please Select

Interpreter Requested
Language Please Select

Handoff Notes Urgent

[Cancel](#) [Save](#) [Done](#)

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Figure 13.6

6. Indicate if an interpreter was required for the referral.

If interpretation assistance was needed in order to conduct this referral, select the **Interpreter Requested** checkbox (Figure 13.7). Then, select the participant's native language from the **Language** list.

23

Current Address
456 Poplar Lane
Fredericksburg, VA
22406 United States

Phone
555-798-3196

DOB
5/4/1980

RELATED CASES

[My Dashboard](#)

*Point of Contact name *Point of Contact phone

Participant prefers not to be contacted for follow-up

*Handoff Type Assigned to
Please Select Please Select

Interpreter Requested
Language Please Select

Handoff Notes Urgent

[Cancel](#) [Save](#) [Done](#)

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Figure 13.7

7. Select the Urgent box if applicable.

Selecting the Urgent checkbox will display the case as a high priority in the case manager's queue.

Only referrals that come in during non-business hours should be flagged as Urgent.

These referrals will display in the Unassigned Cases queue for case manager's to see and delegate.

The screenshot shows the 'Add Referral' form in the Military OneSource CMS. On the left, there is a sidebar with 'RELATED CASES' and a 'My Dashboard' link. The main form area contains the following fields and options:

- *Point of Contact name (text input)
- *Point of Contact phone (text input)
- Participant prefers not to be contacted for follow-up
- *Handoff Type (dropdown menu)
- Assigned to (dropdown menu)
- Interpreter Requested (checkbox)
- Language (dropdown menu)
- Handoff Notes (text area)
- Urgent (checkbox, highlighted with a red box)
- Buttons: Cancel, Save, Done

At the bottom of the form, there is a footer with 'About MC&FP | Privacy&Security | Disclaimer | Feedback' and the 'USA.gov' logo.

Figure 13.8

8. Click Done.

Once the referral is saved it will display in the Current Referrals section in the Dashboard along the left-hand side of the page (Figure 13.9). To make any corrections click on the referral's link.

If you need to create additional referrals for the participant repeat steps 2 through 8 as needed. Each additional referral (up to five) will display in the Current Referrals section.

The screenshot shows the 'View Participant' page in the Military OneSource CMS. The page is divided into several sections:

- Participant Name and Information:** First Name: Jake, Middle: M, Last: Smith, Suffix: , DOB: 5/4/1980.
- Current Address:** Address: 456 Poplar Lane, City: Fredericksburg, State: VA, Zip: 22406, Country: United States.
- Mailing Address:** Address: 3464 Nobel Drive, City: San Diego, State: CA, Zip: 92122, Country: United States.
- Telephone:** Home Phone: 555-798-3196, Work Phone: , Cell Phone: .
- Email:** Email Address: jakesmith@email.com
- Additional Information:** Gender: Male, Marital Status: Married, Requires Interpreter: No, Service Member?: Yes, Referred By: Event.
- Eligibility Info:** Relation: Self, Branch of SVC: Air Force, Pay Grade: W-2, Eligibility Status: Active Duty, Closest Installation: Fort Carson.

On the left side, there is a 'CURRENT REFERRALS' section with a red box around it, containing a link for 'Adoption'. Below it is a 'My Dashboard' link. At the bottom of the page, there is a footer with 'About MC&FP | Privacy&Security | Disclaimer | Feedback' and the 'USA.gov' logo.

Figure 13.9

9. Click Done.

At the end of the phone call after all case referrals have been saved for the participant, click the **Done** button on the View Participant screen (Figure 13.10).

The referrals will be sent to the applicable case manager or to the supervisors to assign.

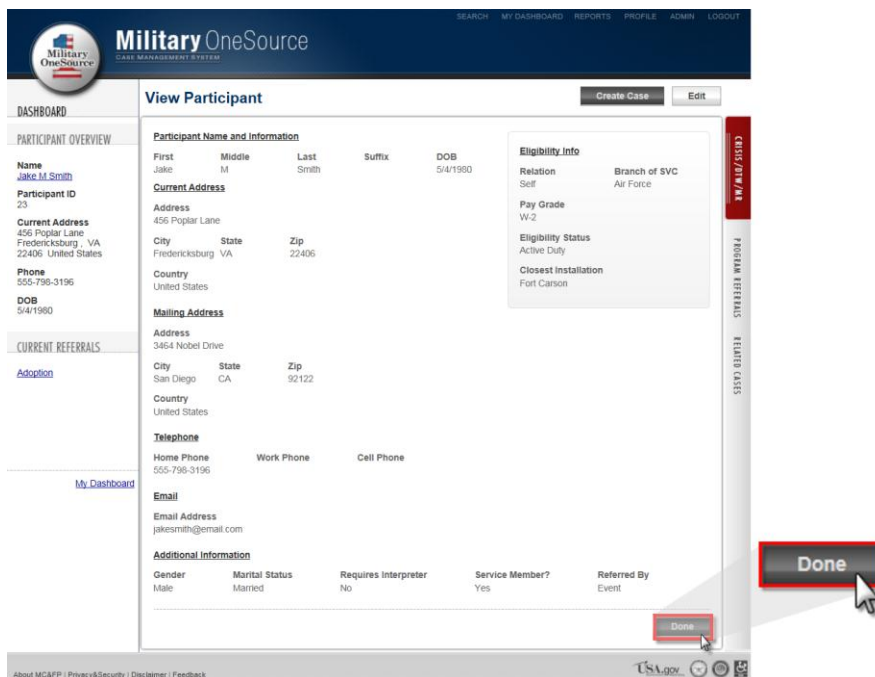


Figure 13.10

Financial Counseling

10. Select Financial.

Select **Financial** to select a referral type and enter in counseling information.

Financial Counseling

Referral Options (check all that apply)

<input type="checkbox"/> Auto Loan	<input type="checkbox"/> Estate Planning	<input type="checkbox"/> Identity Theft Recovery	<input type="checkbox"/> Savings
<input type="checkbox"/> Budgeting	<input type="checkbox"/> Financial Assistance	<input type="checkbox"/> Insurance	<input type="checkbox"/> Tax
<input type="checkbox"/> Consolidation	<input type="checkbox"/> Financial Hardship	<input type="checkbox"/> Investments	<input type="checkbox"/> TSP
<input type="checkbox"/> Consumer Rights	<input type="checkbox"/> Foreclosure	<input type="checkbox"/> Planning for Deployment	<input type="checkbox"/> Other
<input type="checkbox"/> Credit Cards	<input type="checkbox"/> Home Loan	<input type="checkbox"/> Purchasing a Home	
<input type="checkbox"/> Debt / Financial	<input type="checkbox"/> Identity Theft Information	<input type="checkbox"/> Refinance Loan	
<input type="checkbox"/> Education	<input type="checkbox"/> Identity Theft Prevention	<input type="checkbox"/> Retirement	

*Counseling Delivery
Please Select Participant prefers not to be contacted for follow-up

*Company *Counselor Name

Address

City State Postal Code Country

*Phone *Email

*Handoff Type Assigned to Interpreter Requested
Language

Handoff Notes Urgent

[Cancel](#) [Save](#) [Done](#)

Figure 14.1

First, select all the Referral Options that apply. Next, use the drop down menu to select Counseling Delivery.

If the participant does not wish to be contacted for follow-up, please check the box next to “Participant prefers not to be contacted for follow-up.”

Next, fill in the Counseling information including the Company name, Counselor name, Address, Phone

number, and email address.

Finally, select the Handoff Type and Assign to a particular case manager (if applicable).

Indicate if an interpreter was required in order to create the referral for the participant and select their language. Select the Urgent checkbox if the case came in during non-business hours. Then, click Done to close the referral.

Non-Medical Counseling

1. Select Non-Medical.

Select **Non-Medical** to conduct an assessment on the participant and refer them to a Military and Family Life Counselor (MFLC) or a counselor within the MOS Network, or to another agency if they are determined to be out of scope for non-medical counseling.

The screenshot shows the Military OneSource Case Management System interface. The top navigation bar includes the Military OneSource logo and the text "CASE MANAGEMENT SYSTEM". The main navigation menu has several tabs: Financial, **Non-Medical** (highlighted with a red box), SECO, Info & Referrals, Tax, Specialty, Health & Wellness, Recovering Warrior, and Document Translation. The page title is "View Participant" with "Cancel" and "Edit" buttons. The participant information is displayed in a table-like format:

Participant Name and Information			
First	Middle	Last	Suffix
Jake	M	Smith	
DOB	Gender	Marital Status	
5/4/1980	Male	Married	
Current Address			
Address			
456 Poplar Lane			
City	State	Zip	
Fredericksburg	VA	22406	
Country			
United States			

Additional information on the right side of the page includes:

- Eligibility Info**
- Service Member? Yes
- Relation: Self
- Pay Grade: W-2
- Branch of SVC: Air Force
- Eligibility Status: Active Duty

On the left side, there is a "PARTICIPANT OVERVIEW" section with the following details:

- Name: [Jake M. Smith](#)
- Participant ID: 23
- Current Address: 456 Poplar Lane, Fredericksburg, VA 22406, United States
- Phone: 555-798-3196
- DOB: 5/4/1980

At the bottom of the page, there is a vertical sidebar with the text "CRISIS /DTW/WR PROGRAM REFERRALS RE".

Figure 15.1

The Non-Medical Counseling referral assessment screen will display.

Military OneSource
CASE MANAGEMENT SYSTEM

SEARCH PROFILE LOGOUT

Non-Medical Counseling

Family member of those diagnosed with a mental disorder may be eligible for non-medical counseling. These are to be used for NON-CRISIS situations. If this is a CRISIS situation, then please use the Crisis Call Drawer to the right of the screen.

Limits of Confidentiality Explained

Information you provide to me or other counselors will be kept confidential, except to meet legal obligations or to prevent harm to self or others. Legal obligations include requirements of law and DoD or military regulations. Harm to self or others include suicidal thoughts or intent, a desire to harm oneself, domestic violence, child abuse or neglect, violence against any person, and any present or future illegal activity.

Presenting Problem:

Language: Interpreter Requested

Referral Assessment

Select all that apply:

Participant's Risk to Self
 Participant's Risk to Other
 Currently Receiving Mental Health Treatment
 Currently Prescribed Psychoactive Medication
 Diagnosed with Mental Condition

Recurring Psychiatric Hospitalizations
 Fitness for Duty or Court Ordered Evaluation
 Domestic Abuse
 Child Abuse
 Sexual Assault/Rape

Substance Abuse
 Illegal Activity

Scope Determination: Cleared by FAP

[Cancel](#)

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Figure 15.2

2. Read the Limits of Confidentiality text to the participant, and then select the checkbox (Figure 15.3).

Military OneSource
CARE MANAGEMENT SYSTEM

SEARCH PROFILE LOGOUT

Non-Medical Counseling

Family member of those diagnosed with a mental disorder may be eligible for non-medical counseling. These are to be used for NON-CRISIS situations. If this is a CRISIS situation, then please use the Crisis Call Drawer to the right of the screen.

Limits of Confidentiality Explained

Information you provide to me or other counselors will be kept confidential, except to meet legal obligations or to prevent harm to self or others. Legal obligations include requirements of law and DoD or military regulations. Harm to self or others include suicidal thoughts or intent, a desire to harm oneself, domestic violence, child abuse or neglect, violence against any person, and any present or future illegal activity.

Participant Overview:
Name: Jake Smith
Participant ID: 23
Current Address: 456 Poplar Lane, Fredericksburg, VA 22406, United States
Phone: 555-789-1658
DOB: 5/4/1980

Presenting Problem: Please Select

Language: Interpreter Requested, Please Select

Referral Assessment

Select all that apply:

- Participant's Risk to Self
- Participant's Risk to Other
- Currently Receiving Mental Health Treatment
- Currently Prescribed Psychoactive Medication
- Diagnosed with Mental Condition
- Recurring Psychiatric Hospitalizations
- Fitness for Duty or Court Ordered Evaluation
- Domestic Abuse
- Child Abuse
- Sexual Assault/Rape
- Substance Abuse
- Illegal Activity

Scope Determination: Please Select Cleared by FAP

Cancel Save Done

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CRISIS / DTW / AR
PROGRAM REFERRALS
RELATED CASES

Figure 15.3

3. Select the Presenting Problem.

- a. If an interpreter is required, select the Interpreter Requested checkbox and select a Language from the drop down menu.

The screenshot shows the 'Non-Medical Counseling' form in the Military OneSource CMS. The top navigation bar includes 'SEARCH', 'PROFILE', and 'LOGOUT'. The left sidebar contains 'DASHBOARD', 'PARTICIPANT OVERVIEW', and 'RELATED CASES'. The participant overview section lists details for Jake Smith, including his ID (23), current address (456 Poplar Lane, Fredericksburg, VA 22406), phone (555-789-1658), and DOB (5/4/1980). The main content area is titled 'Non-Medical Counseling' and contains a disclaimer about confidentiality. Below this is a section for 'Limits of Confidentiality Explained' with an unchecked checkbox. The 'Presenting Problem' dropdown menu and the 'Language' dropdown menu are both highlighted with red boxes. The 'Language' dropdown includes an unchecked checkbox for 'Interpreter Requested'. Below these is the 'Referral Assessment' section, which asks to 'Select all that apply' and lists various conditions with unchecked checkboxes, such as 'Participant's Risk to Self', 'Recurring Psychiatric Hospitalizations', 'Substance Abuse', 'Participant's Risk to Other', 'Fitness for Duty or Court Ordered Evaluation', 'Illegal Activity', 'Currently Receiving Mental Health Treatment', 'Domestic Abuse', 'Currently Prescribed Psychoactive Medication', 'Child Abuse', and 'Diagnosed with Mental Condition'. There is also a 'Scope Determination' dropdown menu and a 'Cleared by FAP' checkbox. At the bottom right, there are 'Cancel', 'Save', and 'Done' buttons. The footer includes links for 'About MC&FP', 'Privacy&Security', 'Disclaimer', and 'Feedback', along with the USA.gov logo and other icons.

Figure 15.4

4. Assess the participant and select the applicable issue(s) (if any).

Military OneSource
CASE MANAGEMENT SYSTEM

SEARCH PROFILE LOGOUT

Non-Medical Counseling

Family member of those diagnosed with a mental disorder may be eligible for non-medical counseling. These are to be used for NON-CRISIS situations. If this is a CRISIS situation, then please use the Crisis Call Drawer to the right of the screen.

Limits of Confidentiality Explained

Information you provide to me or other counselors will be kept confidential, except to meet legal obligations or to prevent harm to self or others. Legal obligations include requirements of law and DoD or military regulations. Harm to self or others include suicidal thoughts or intent, a desire to harm oneself, domestic violence, child abuse or neglect, violence against any person, and any present or future illegal activity.

Presenting Problem:

Language:

Interpreter Requested

Referral Assessment

Select all that apply:

- Participant's Risk to Self
- Participant's Risk to Other
- Currently Receiving Mental Health Treatment
- Currently Prescribed Psychoactive Medication
- Diagnosed with Mental Condition
- Recurring Psychiatric Hospitalizations
- Fitness for Duty or Court Ordered Evaluation
- Domestic Abuse
- Child Abuse
- Sexual Assault/Rape
- Substance Abuse
- Illegal Activity

Scope Determination: Cleared by FAP

[Cancel](#)

CRISIS /DTW/MR
PROGRAM REFERRALS
RELATED CASES

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Figure 15.5

- Determine if the referral is In Scope for Non-Medical Counseling or Outside Scope for Non-Medical Counseling. Select the checkbox if the participant was cleared by FAP.
- Follow the steps below according to the scope determination selected.

SEARCH PROFILE LOGOUT

Military OneSource
CASE MANAGEMENT SYSTEM

Non-Medical Counseling

Family member of those diagnosed with a mental disorder may be eligible for non-medical counseling. These are to be used for NON-CRISIS situations. If this is a CRISIS situation, then please use the Crisis Call Drawer to the right of the screen.

Limits of Confidentiality Explained

Information you provide to me or other counselors will be kept confidential, except to meet legal obligations or to prevent harm to self or others. Legal obligations include requirements of law and DoD or military regulations. Harm to self or others include suicidal thoughts or intent, a desire to harm oneself, domestic violence, child abuse or neglect, violence against any person, and any present or future illegal activity.

Presenting Problem:

Language: Interpreter Requested

Referral Assessment

Select all that apply:

<input type="checkbox"/> Participant's Risk to Self	<input type="checkbox"/> Recurring Psychiatric Hospitalizations	<input type="checkbox"/> Substance Abuse
<input type="checkbox"/> Participant's Risk to Other	<input type="checkbox"/> Fitness for Duty or Court Ordered Evaluation	<input type="checkbox"/> Illegal Activity
<input type="checkbox"/> Currently Receiving Mental Health Treatment	<input type="checkbox"/> Domestic Abuse	
<input type="checkbox"/> Currently Prescribed Psychoactive Medication	<input type="checkbox"/> Child Abuse	
<input type="checkbox"/> Diagnosed with Mental Condition	<input type="checkbox"/> Sexual Assault/Rape	

Scope Determination: Cleared by FAP

In Scope for Non-Medical Counseling
Outside Scope for Non-Medical Counseling

[Cancel](#)

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Figure 15.6

7. If the participant is outside scope for non-medical counseling:

Select any agencies that you refer the participant to. Then, indicate whether the participant has insurance, if they declined the referral, or if they terminated the call. Click **Done** to complete the referral (Figure 15.7).

Referrals

Select all that apply:

- Child Protective Services
- Community Service
- Family Advocacy
- Judge Advocate General
- Local Hospital
- MTF

Handoff Type:

- Participant has insurance
- Participant declined referral
- Participant terminated call

Handoff Notes:

Urgent

Cancel Save Done

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Figure 15.7

8. If the participant is within scope for non-medical counseling:

If the referral is In Scope for Non-Medical Counseling, Research Study questions will be displayed.

*Scope Determination

Cleared by FAP

Participant agrees to participate in research study

*RAND Study

Yes No

*RAND Phase II Study

Yes No

Figure 15.8

If the referral is In Scope for Non-Medical Counseling, select the **Counseling Preference** and **Type of Counseling** (Figure 15.8).

If the participant is interested in in-person counseling select the checkbox if they are within 40 miles of an MFLC installation. If they are within 40 miles of an MFLC installation, select the checkbox if they accept MFLC services. Then, select the applicable **Referral Type**—MFLC, or MOS Network.

If you are not sure whether or not they are within 40 miles of an MFLC installation, select MFLC as the Referral Type and then follow the MFLC instructions below to search for installations. You can change the Referral Type and unselect the checkboxes if a nearby installation isn't found.

*Scope Determination
In Scope for Non-Medical Counseling Cleared by FAP

Participant agrees to participate in research study

*Non-Medical Study
 Yes No

*RAND Phase II Study
 Yes No

*RAND Study
 Yes No

*RAND Study test
 Yes No

*Counseling Preference Participant is within 40 miles of MFLC installation [Open MFLC Locator](#)

*Type of Counseling Requested Participant accepts MFLC services

Individual Couple Family

*Referral Type

*Handoff Type

Handoff Notes Urgent

Figure 15.8

a. If the referral is for MFLC:

Select the **Open MFLC**

Locator link to search for MFLC installations near the participant.

The MFLC Locator search screen will open in a new window.

Figure 15.9

Enter the participant's postal code and click **Search** to see all installations that are within 40 miles. Or, select the participant's state, country, or the installation at which they are located to see which MFLC locations are nearby (if any).

Location	Address	Postal Code	Phone	Primary Category	Installation	Select
Charlottesville Center	456 Main Street Charlottesville, VA, United States	22902	555-100-0000	MFLC	Camp Parks	+
ACS	123 ABC Road Charlottesville, VA, United States	22311	125-545-0099	MFLC	Fort Rucker	+
ACS	123 ABC Road Charlottesville, VA, United States	22311	125-545-0099	MFLC	Fort Rucker	+
Marine Corps Center	3089 Roan Street Quantico, VA, United States	22134	724-238-6666	MFLC		+
Financial Assistance	350 Hall Street Charlottesville, VA, United States	15906	814-555-5555	MFLC		+

Figure 15.10

If multiple MFLC locations are found, choose one that has a Primary Category specialization applicable to the participant's issue. Choose a second MFLC location as a backup if desired.

Then, in the referral form select the **MFLC Category** for the participant's issue. Click the + icon next to each POC to select a search result for the first and second (if applicable) MFLC locations you choose from the MFLC Locator (Figure 15.11). If the MFLC Location isn't at an installation leave the field blank. Finally, click the **Done** button to close the referral (figure 15.11).

The screenshot shows a web form for MFLC referrals. At the top, there's a 'Scope Determination' section with a dropdown menu set to 'In Scope for Non-Medical Counseling' and a checkbox for 'Cleared by FAP'. Below that is a section for counseling preferences, including a dropdown for 'Counseling Preference', checkboxes for 'Participant is within 40 miles of MFLC installation' and 'Participant accepts MFLC services', and radio buttons for 'Type of Counseling Requested' (Individual, Couple, Family). A 'Referral Type' dropdown is set to 'MFLC'. The 'MFLC Info' section, highlighted with a red box, contains a dropdown for 'MFLC Category' and two pairs of input fields: 'POC Phone' and 'POC Installation Name', and '2nd POC Phone' and '2nd POC Installation Name', each with a '+' icon. Below this is a 'Handoff Type' dropdown and a 'Handoff Notes' text area with an 'Urgent' checkbox. At the bottom right, there are 'Cancel', 'Save', and 'Done' buttons, with 'Done' highlighted by a red box. The footer includes links for 'About MC&FP', 'Privacy&Security', 'Disclaimer', and 'Feedback', along with 'USA.gov' and other logos.

Figure 15.11

b. If the Referral Type is for the MOS Network (Figure 15.12):

If the **Referral Type** is MOS Network, enter the participant's reason for requesting counseling. Enter the provider's name, phone number, location, and authorization number. Select the checkbox if the participant does not want to be contacted at a later date to check on their status for non-medical counseling.

If you would like to schedule a follow-up reminder for the specialty consultant that will be overseeing the progress of the case, enter the due date and a small note. The follow up will be

sent to the responsible people within the system.

Finally, enter the Handoff Type and Notes and click the **Done** button to close the referral form.

The screenshot shows a web form for a MOS Network referral. At the top, there are radio buttons for 'Type of Counseling Requested' (Individual, Couple, Family) and a checkbox for 'Participant accepts MFLD services'. Below that is a dropdown for '*Referral Type' set to 'MOS Network'. A large red box highlights the 'MOS Network' section, which contains: '*Reason Requesting Counseling' and '*Authorization Number' text boxes; '*Provider Name', 'Phone', and '*Location' text boxes; a checkbox for 'Participant prefers not to be contacted for follow-up'; 'Follow Up Date' (with a calendar icon) and 'Follow Up Reason' text boxes, and a 'Clear' button. Below this is a 'Handoff Type' dropdown menu with 'Please Select' and a 'Handoff Notes' text area with an 'Urgent' checkbox. At the bottom right, there are 'Cancel', 'Save', and 'Done' buttons, with the 'Done' button highlighted by a red box. The footer includes a 'Disclaimer | Feedback' link, the USA.gov logo, and accessibility icons.

Figure 15.12

SECO

1. Select SECO

Enter the Handoff Type and Notes and click the Done button to close the referral form (Figure 16.1).

SECO Triage

*Handoff Type:

Assigned to:

Interpreter Requested

Language:

Handoff Notes:

Urgent

[Cancel](#)

Figure 16.1

Information and Referrals

1. Select Information and Referrals

Check the boxes next to the appropriate referrals. Enter the Handoff Type and Notes and click the Done button to close the referral form (Figure 17.1).

SEARCH MY DASHBOARD REPORTS PROFILE ADMIN LOGOUT

Military OneSource
CARE MANAGEMENT SYSTEM

Information & Referral

Select all that apply:

<input type="checkbox"/> Casualty Assistance Officer Phone Number	<input type="checkbox"/> Spouse Abandonment – Child Support	<input type="checkbox"/> Tax: Earned Income Tax Credit	<input type="checkbox"/> Tax: Other State Tax Issues
<input type="checkbox"/> Child Care	<input type="checkbox"/> Official Travel Information	<input type="checkbox"/> Tax: Education Student Loan Interest	<input type="checkbox"/> Tax: Personal Exemptions
<input type="checkbox"/> Child Care Aware	<input type="checkbox"/> Unofficial Travel Information	<input type="checkbox"/> Tax: Filing Extensions and Deadlines	<input type="checkbox"/> Tax: Power of Attorney
<input type="checkbox"/> Exceptional Family Member Program	<input type="checkbox"/> Veteran Crisis Line	<input type="checkbox"/> Tax: Filing Status Issues	<input type="checkbox"/> Tax: Rental Income
<input type="checkbox"/> Financial Grant Information	<input type="checkbox"/> YMCA Enrollment	<input type="checkbox"/> Tax: Interest and Dividends	<input type="checkbox"/> Tax: Retirement Savings Contribution Credit
<input type="checkbox"/> Disaster Recovery	<input type="checkbox"/> Other	<input type="checkbox"/> Tax: IRA	<input type="checkbox"/> Tax: Small Business
<input type="checkbox"/> Fulfillment	<input type="checkbox"/> Tax: Alimony	<input type="checkbox"/> Tax: Itemized Deductions	<input type="checkbox"/> Tax: State Specific Forms
<input type="checkbox"/> GI/VA Loan information	<input type="checkbox"/> Tax: Child & Dependent Care Tax Credit	<input type="checkbox"/> Tax: Misc. Tax Information	<input type="checkbox"/> Tax: Tax Software Issues (Vendor)
<input type="checkbox"/> Low Income/Social Services	<input type="checkbox"/> Tax: Capital Gains and Losses	<input type="checkbox"/> Tax: Moving (Form 3903)	
<input type="checkbox"/> Military Relocation Information	<input type="checkbox"/> Tax: Child Tax Credit	<input type="checkbox"/> Tax: Multi-State Filing Issues	
<input type="checkbox"/> Non-Eligible Counseling Services	<input type="checkbox"/> Tax: Combat Zone Income	<input type="checkbox"/> Tax: Other Income Issues	

CRISIS /DTW/IR
PROGRAM REFERRALS

Figure 17.1

Tax

1. Select Tax

Select the Tax Referral option and enter in a point of contact name and phone number. Next, enter the Handoff Type and Notes and click the Done button to close the referral form (Figure 18.1).

The screenshot shows the Military OneSource Case Management System interface. The top navigation bar includes links for SEARCH, MY DASHBOARD, REPORTS, PROFILE, ADMIN, and LOGOUT. The main header features the Military OneSource logo and the text 'CASE MANAGEMENT SYSTEM'. On the left, a sidebar contains navigation options: DASHBOARD, PARTICIPANT OVERVIEW (with sub-links for Name: Josh Jacobs, Participant ID: 12, Current Address, Phone: 814-200-2000, and DOB: 5/16/1984), and RELATED CASES (with links for Bulk Fulfillment, SECO Specialty Consult, and More). The main content area is titled 'Tax Services' and contains the following fields and options:

- Tax Referral Options:**
 - State
 - Federal
- *Point of Contact name** and ***Point of Contact phone** (text input fields)
- Participant prefers not to be contacted for follow-up
- *Handoff Type** (dropdown menu, 'Please Select')
- Assigned to** (dropdown menu, 'Please Select')
- Interpreter Requested
- Language** (dropdown menu, 'Please Select')
- Handoff Notes** (text area)
- Urgent

At the bottom right of the form are buttons for [Cancel](#), **Save**, and **Done**.

Figure 18.1

Specialty

1. Select Specialty

After selecting Specialty, you are prompted to choose which type of specialty consult you would like to open. Your choices include Special Needs, Elder Care, Education, Adult Disability, Adoption, Work Life, and Bulk Fulfillment (Figure 19.1).

The process for entering specialty consult referral information will be similar across most of the specialty consult types, but they all will collect different information specific to their type.

After selecting your Specialty Consult type, check the boxes for referrals given. Enter the Handoff Type and Notes and click the Done button to close the referral form.

The screenshot shows the Military OneSource interface. At the top, there is a navigation bar with links for SEARCH, MY DASHBOARD, REPORTS, PROFILE, ADMIN, and LOGOUT. Below this is a secondary navigation bar with tabs for Financial, Non-Medical, SECO, Info & Referrals, Tax, Specialty (selected), Health & Wellness, Recovering Warrior, and Document Translation. Under the Specialty tab, a red box highlights sub-tabs for Special Needs, Elder Care, Education, Adult Disability, Adoption, Work Life, and Bulk Fulfillment. The main content area is titled 'View Participant' and contains a form for participant information. The form is organized into sections: Participant Name and Information, Current Address, Mailing Address, Telephone, Email, and Additional Information. A sidebar on the right contains links for CRISIS /OTW/ME, PROGRAM REFERRALS, and RELATED CASES. At the bottom of the form, there are 'Void' and 'Done' buttons.

Figure 19.1

Health and Wellness Coaching

1. Select Health and Wellness

Fill in Coaching Referral Option, Coaching Delivery, Coach Name, Phone and Email Address. Enter the Handoff Type and Notes and click the Done button to close the referral form (Figure 20.1).



Figure 20.1

Recovering Warrior

1. Select Recovering Warrior

Check the boxes for any referrals needed for the participant. Enter the Handoff Type and Notes and click the Done button to close the referral form. (Figure 21.1).



Figure 21.1

Document Translation

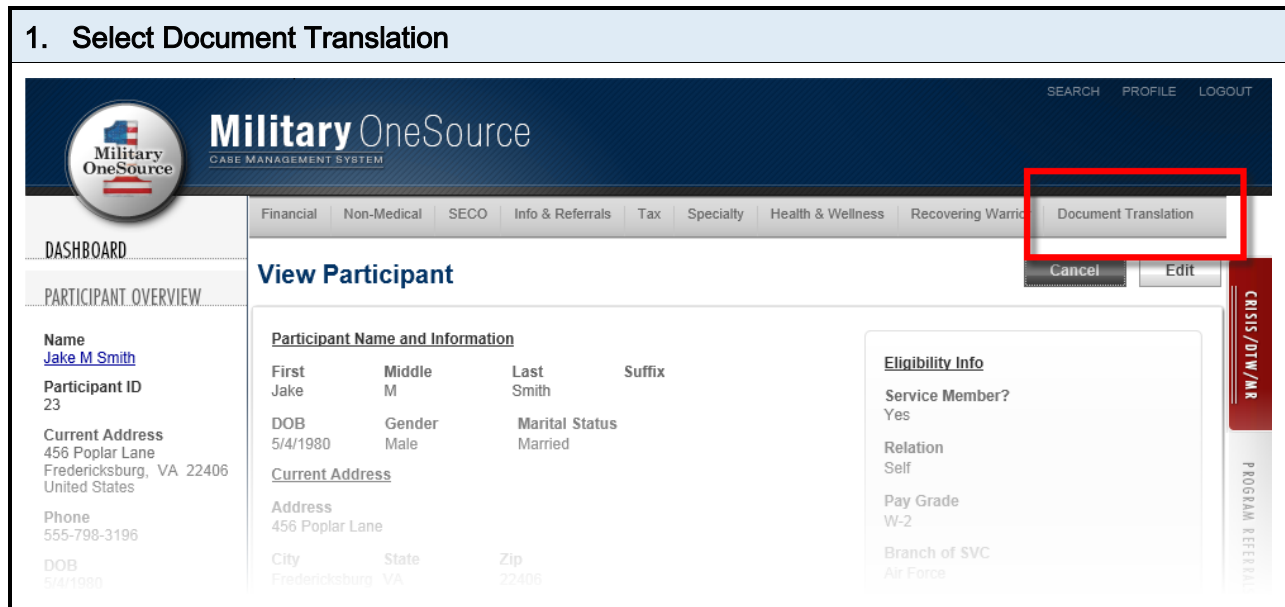


Figure 22.1

2. Enter information for the document to be translated.

Military OneSource
CASE MANAGEMENT SYSTEM

SEARCH PROFILE LOGOUT

Document Translation

Documents

Document Type* [Please Select] From Language* [Please Select] No. of Pages* []

Details of Other [] To Language* [Please Select]

Document will be delivered via: [Please Select] Document will be returned via: [Please Select]

Add Document

*Handoff Type [Please Select] Assigned to [Please Select] Interpreter Requested Language [Please Select]

Urgent

Handoff Notes []

Cancel Save Done

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CRISIS / DTW / R

PROGRAM REFERRALS RELATED CASES

Figure 22.2

3. If more than one document needs to be translated, click the Add Document button and enter the details for the additional document. Repeat for each additional document to be translated.

Military OneSource
CASE MANAGEMENT SYSTEM

SEARCH PROFILE LOGOUT

Document Translation

Documents

Document Type*
Please Select

From Language*
Please Select

No. of Pages*
[]

Details of Other
[]

To Language*
Please Select

Document will be delivered via: Please Select

Document will be returned via: Please Select

Add Document

*Handoff Type
Please Select

Assigned to
Please Select

Interpreter Requested
Language
Please Select

Handoff Notes
 Urgent

Cancel Save Done

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CRISIS/OTW/MR
PROGRAM REFERRALS
RELATED CASES

Figure 22.3

4. Select the type of handoff and the person that the case will be assigned to. Enter additional notes about the handoff in the textbox.

The screenshot displays the Military OneSource Case Management System interface for a 'Document Translation' task. On the left, a sidebar provides participant details for Jake Smith, including his name, ID (38), address (456 Poplar Lane, Fredericksburg, VA 22406), phone (555-789-1658), and DOB (5/4/1980). The main content area is titled 'Document Translation' and contains a 'Documents' section with fields for Document Type, From Language, No. of Pages, Details of Other, and To Language. Below this is an 'Add Document' button. A red box highlights the 'Handoff Type' and 'Assigned to' dropdown menus, both currently set to 'Please Select'. To the right of these are checkboxes for 'Interpreter Requested' and 'Urgent', and a 'Language' dropdown. At the bottom of the form are 'Cancel', 'Save', and 'Done' buttons. The footer includes links for 'About MC&FP', 'Privacy&Security', 'Disclaimer', and 'Feedback', along with the USA.gov logo.

Figure 22.4

5. Indicate if an interpreter was required in order to create the referral for the participant and select their language. Select the Urgent checkbox if the case manager should treat the case as a priority. Then, click Done to close the referral.

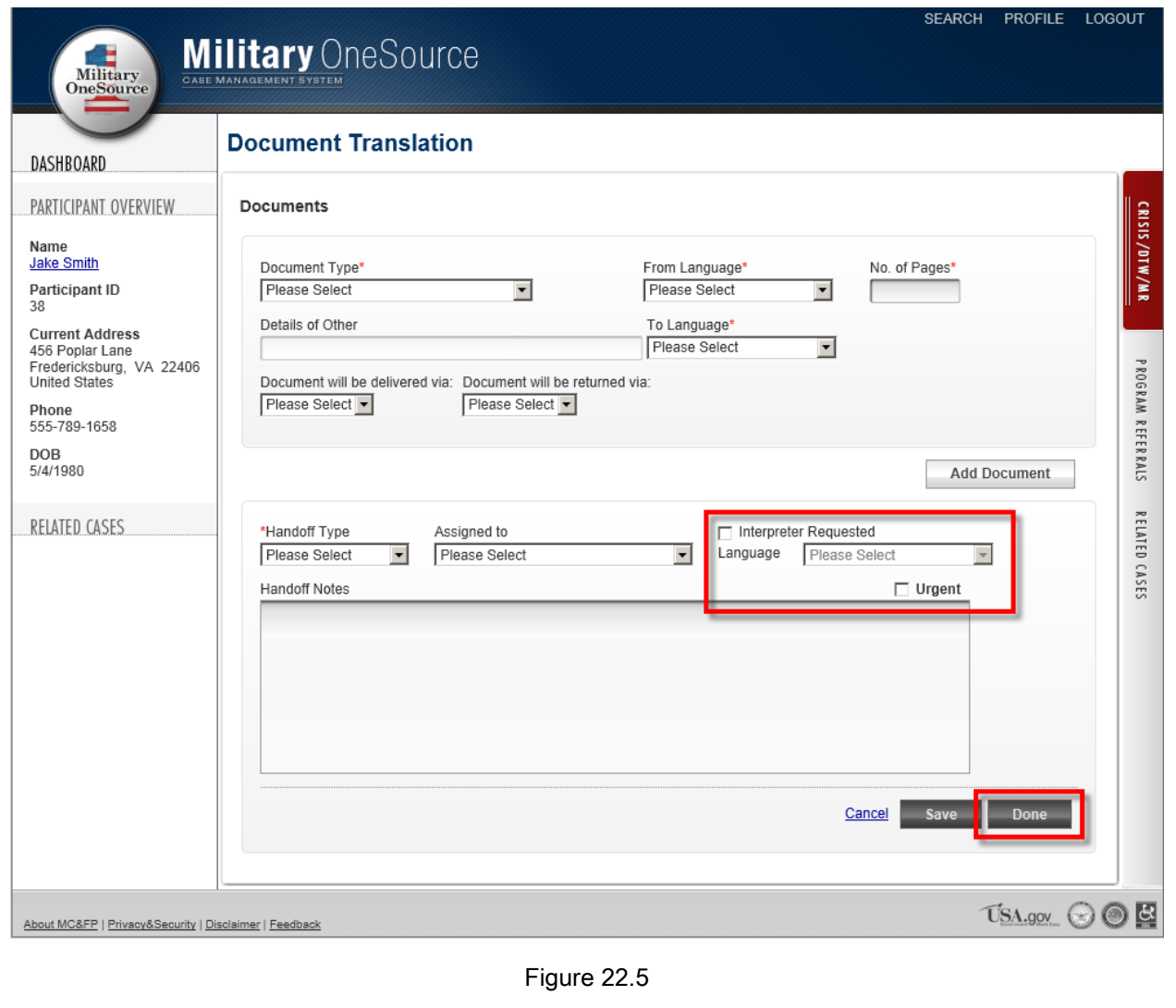


Figure 22.5

Adding a Contact Note to a Case

To add notes to a case for the case manager, such as if the participant were to call you after hours requesting information regarding their ongoing case, create a contact note by following these steps:

1. Open the participant's record.

Locate the participant on the search screen (see [Search for a Participant](#)) and click on their name to open their record.

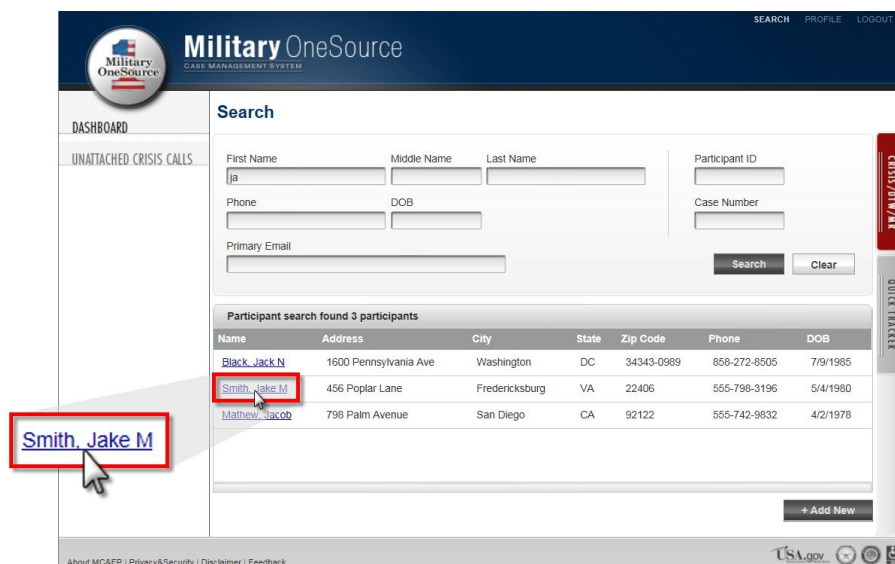


Figure 23.1

2. Click on the Related Cases tab.

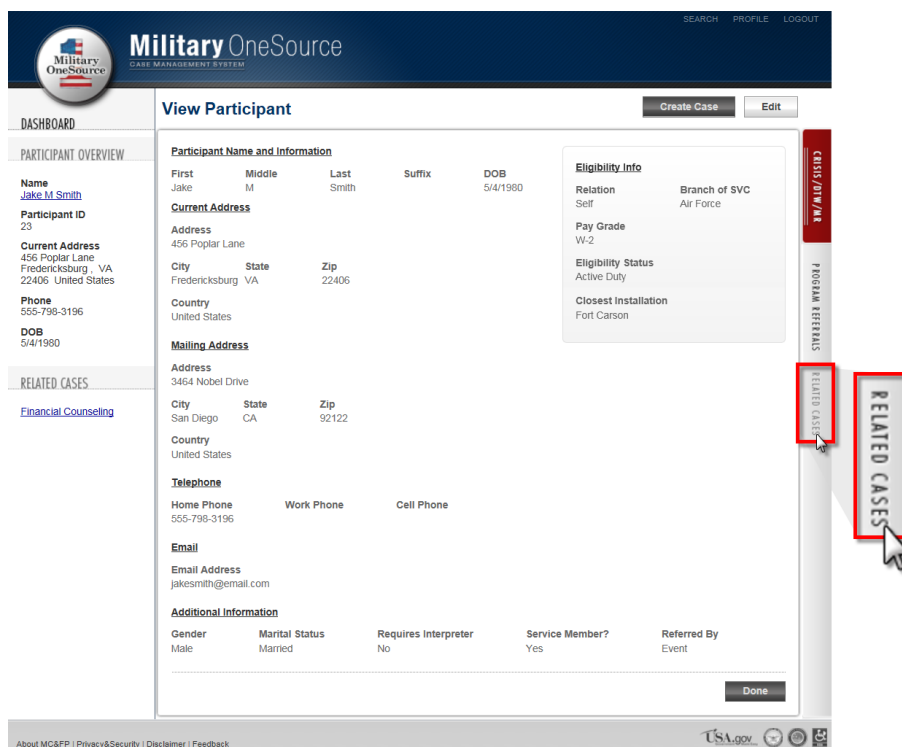


Figure 23.2

3. Select the applicable case.



Figure 23.3

4. Click on Add Contact Note

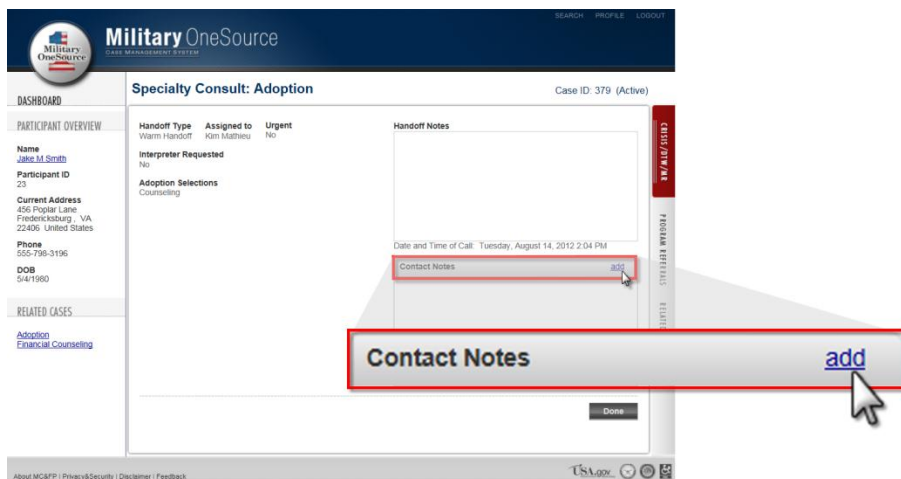


Figure 23.4

5. Enter the note's details and click Done

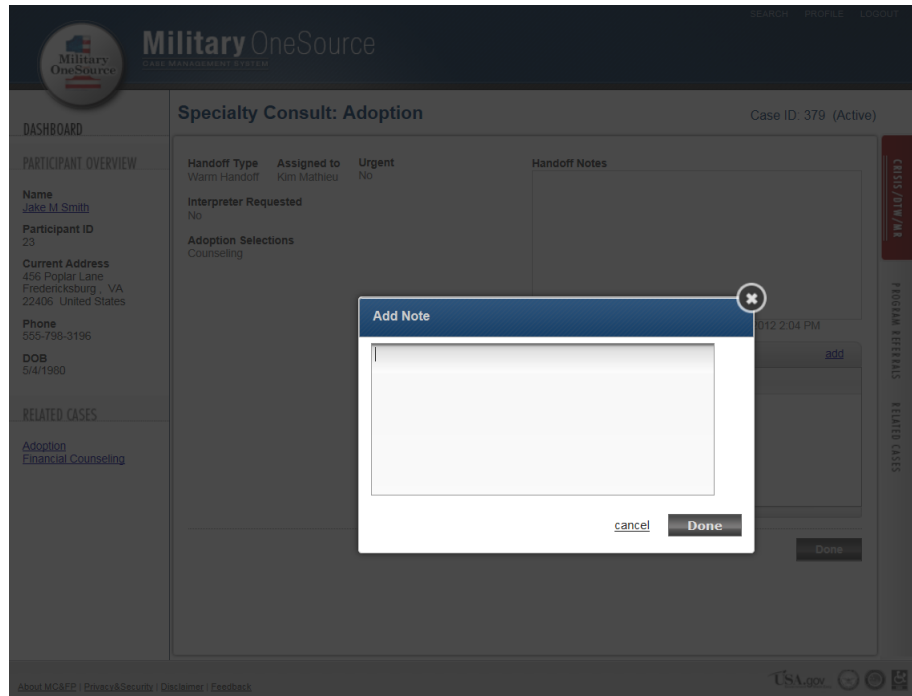


Figure 23.5

The note will be added to the Contact Notes section of the case for the case manager to read.

Your name and the date and time that you entered the note will automatically be added to the entry.

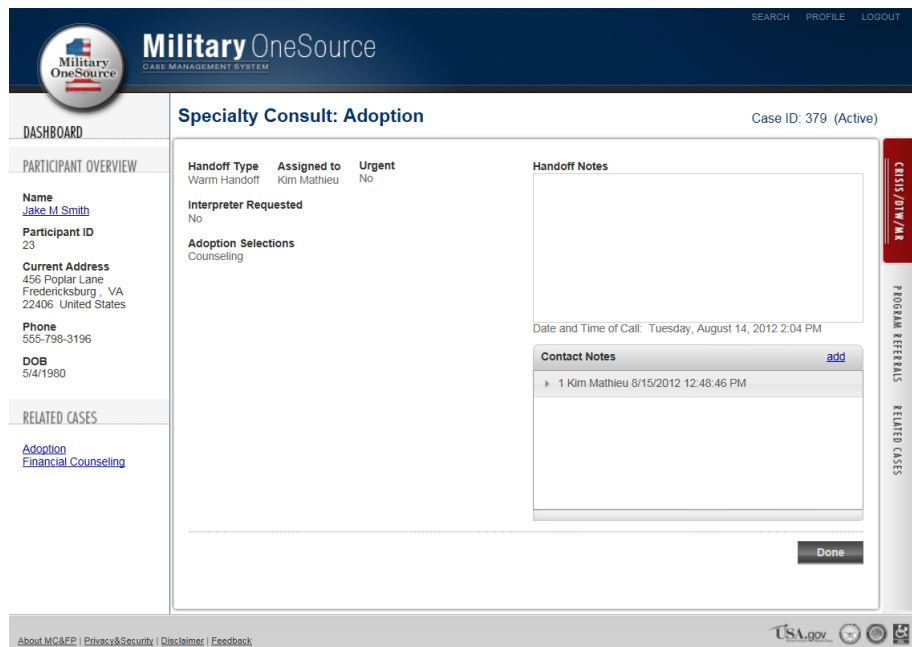


Figure 23.6