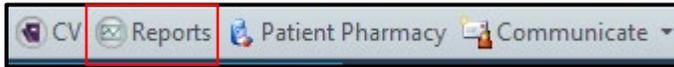## CALOMS ERROR DETAIL REPORT (CEDR)
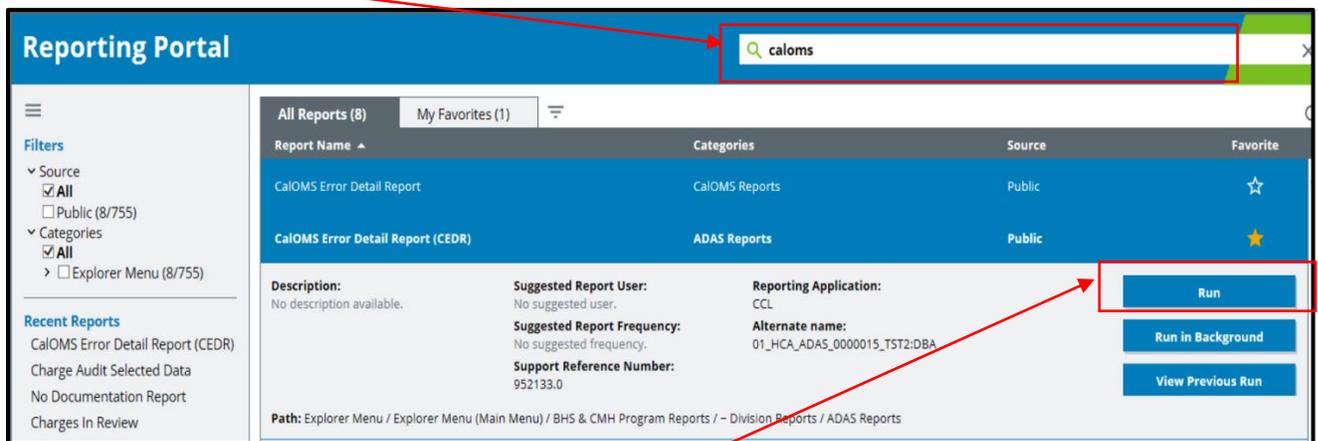
Report Description:

This report can be run for one or more facilities. It will display a list of all CalOMS errors within the report date range parameters. It will result one row for every field an error has occurred under a FIN.

1. Open Reporting Portal from toolbar

2. Type the name of the report in the Search Bar

3. Select the report to open Menu
4. Select Run

Note: If you want to add this report to your 'My Favorites' menu, select the star icon under the Favorite column

The report menu will appear as shown below.

Note: Use the mouse or "Tab" key to move from field to field. **If you press "Enter" or "Execute" before all data parameters have been input, the report will result with no data.**

Optional: Select '**Return to prompts on close of output'** if you need to run this report more than one time. This option will bring you back to this query when exiting the current report results instead of closing the Reports Portal.

Special Notes:

If your program location is not displayed under **Select Provider**, it means there are no errors for that location. Please remember to run the report no less then 2 hours after the form was entered.

The report can be saved into a shared folder as a csv.doc. then opened as an excel.doc to filter and sort as desired.

Due to HIPAA regulations, the report should **ONLY** be saved in a secure network folder/ or a Facility's secure Shared folder. Do not save reports with Patient Health Information (PHI) on a computer's hard drive, Desktop, "My Documents" or personal network folder, e.g., "T-Drive." If you do not have a share folder mapped in your "T Drive", please contact IT to map a share folder shortcut.

The Report Results:

PROVIDER#	PROVIDERNAME	FIN	ADMITDATE	REGDATE	ENC_TYPE	BUILDING
303025	ADAS SUD Santa Ana		01/12/2022	01/12/2022	CalOMS Encounter	SUD SA ODF
303025	ADAS SUD Santa Ana		01/12/2022	01/12/2022	CalOMS Encounter	SUD SA ODF
303025	ADAS SUD Santa Ana		04/15/2022	04/15/2022	CalOMS Encounter	SUD SA ODF
303025	ADAS SUD Santa Ana	PHI Removed	05/04/2022	05/04/2022	CalOMS Encounter	SUD SA ODF
303025	ADAS SUD Santa Ana		05/04/2022	05/04/2022	CalOMS Encounter	SUD SA ODF
303025	ADAS SUD Santa Ana		06/13/2022	06/13/2022	CalOMS Encounter	SUD SA ODF
303025	ADAS SUD Santa Ana		06/13/2022	06/13/2022	CalOMS Encounter	SUD SA ODF
303025	ADAS SUD Santa Ana		06/16/2022	06/16/2022	CalOMS Encounter	SUD SA ODF

PROG_SPEC	EMPLOYEENAME	FORMTYPE	FIELDID	ERRORDESCRIPTION	TRANSACTIONDATE
Not Applic	Linares LMFT, Maria	DISCHARGE	CID12	Must answer CID12	08/02/2022 15:24
Not Applic	Linares LMFT, Maria	DISCHARGE	CID7	SSN not provided in Registration. If admission-pu	08/02/2022 15:24
Not Applic	Elliott LCSW, Wendy	DISCHARGE	ADM1	ADM1 (CalOMS Admission Date) does not match Regist	05/12/2022 13:52
Not Applic	Sanchez ASW, Esteban	DISCHARGE	DIS1	Discharge Date not provided in specified format MM	07/28/2022 15:22
Not Applic	Sanchez ASW, Esteban	DISCHARGE	DIS2	Must provide answer to	07/28/2022 15:22
Not Applic	Sanchez ASW, Esteban	ADMISSION	CID10	Birth First Name invalid, check registration and b	06/13/2022 09:50
Not Applic	Sanchez ASW, Esteban	ADMISSION	CID9	Birth First Name invalid, check registration and b	06/13/2022 09:50
Not Applic	Carmona SUD LCSW, Ni	ADMISSION	SOC1	Must provide answer to SOC1 (Social Support)	06/16/2022 15:41

Description of Column Headings:

PROVIDER#: The State issued CalOMS number for the County of Orange

PROVIDERNAME: The name of the Facility location under which the CalOMS was entered

FIN: **F**inancial **I**dentification **N**umber a unique identifier for the encounter

ADMITDATE: Date of the EOC's 1st Encounter for the client

REGDATE: Date the encounter was created in the Registration conversation

ENC_TYPE: The encounter type of the FIN – should be "CalOMS Encounter"

BUILDING: The specific program at the facility location which the CalOMS was entered

PROG_SPEC: Not currently use by SUD; can be pulled from the last FIN in Registration, what was selected in the program specialty field in the Access Log, or the Program Specialty at the location where the service is provided

EMPLOYEENAME: Name of Employee who entered the CalOMS

FORMTYPE: Identifies the CalOMS form completed (Admission, Annual, or Discharge)

FIELDID: Identifies the field in which the error occurred

ERRORDESCRIPTION: Description of the error

TRANSACTIONDATE: The date the clinician last saved (made an edit) the CalOMS