



WebLEDS Medical Health Database

Training Guide

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Introduction

The precursor to HB 3466 (HB 2054) was the result of the efforts of state law enforcement officials, community mental health representatives, and clients of the mental health system and their families. After numerous high profile events involving individuals with mental illness, stakeholders agreed on the importance of three goals: (1) protection for at risk individuals in the community; (2) protection for officers working in the field; and (3) peace of mind for families of at risk individuals. HB 3466 expands the categories eligible for enrollment in the database as a result of ongoing discussion with system stakeholders.

HB 3466 does the following: (1) Creates a voluntary medical health database that provides information to assist law enforcement officers in identifying individuals in need of medical, mental health and social services; (2) Directs the Department of Human Services to develop enrollment and revocation forms for submission of personal medical diagnosis, medication and contact information to the database; (3) Identifies consent requirements for enrollment; (4) Defines qualifying diagnosis that allows for registry.

The following training guide provides information on how to properly enter, modify, delete and query information into the WebLEDS Medical Health Database.

To gain access to this database, contact LEDS at (503) 378-3055 ext 55021.

<https://webleds.cjis.state.or.us/wlmhs.htm>

To have a username and password issue to your office, contact LEDS at (503) 378-3055 ext. 55021.



**WebLEDS
Mental Health
System**



Username: Password:

Log On

WebLEDS MHS
(Medical Health Database)

User Information

User ID:
Leds ID:

Responses

View Responses

Record Management

Inquiry

Entry

Modify

Cancel

Add Supplemental Info

Delete Supplemental Info

Add Contact

Delete Contact

Account Management

Display Sent/Recv Log

Change Screen Colors

Change Password

Logoff the System

WebLEDS
Medical Health
Database



This is a screen shot of the main page of the data base.

This is where the operator has the option to query, enter, modify and cancel records. To add a new record, choose the Entry button. To modify (update) an existing record, chose the Modify button. To cancel (delete) an existing record, choose the Cancel button.

To add last known address and phone numbers for the client, choose the Add Contact button.

To remove the last known address and phone numbers for the client, choose the Delete Contact button.

To add contact information; primary care physician, case manager, probation officer and emergency contact choose the Add Supplemental Info button. To delete contact information, choose the Delete Supplemental Info button.

All information can be obtained from the Volunteer Consent Form, DHS 3466.

WebLEDS MHS
(Medical Health Database)

User Information

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Leds ID:

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Delete Supplemental Info

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Delete Contact

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Logoff the System

Entry

ORI:	<input type="text"/>	ORI Number
NAM:	<input type="text"/>	Name (Last,First M)
DOB:	<input type="text"/>	Date of Birth (YYYYMMDD)
HGT:	<input type="text"/>	Height
WGT:	<input type="text"/>	Weight
EYE:	-- select --	Eye Color
HAI:	-- select --	Hair Color
SMT:	<input type="text"/> - Lookup	Scars, Marks and Tattoos
SOC:	<input type="text"/>	Social Security Number
OLN:	<input type="text"/>	Operators License Number
OLS:	<input type="text"/> - Lookup	Operators License State
OLY:	<input type="text"/>	Operators License Year (YYYY)
RTP:	MED = Medical Record	Record Type
DOR:	<input type="text"/>	Date of Record (YYYYMMDD)
OCA:	<input type="text"/>	Originating Agency Case Number
MIS:	<input type="text"/>	Illness/Condition Info & Diagnosis

Submit Show Transaction Clear Form

Entry Screen: The ORI, Name, Record Type, Date of Record and Originating Agency Case Number fields are all mandatory entry fields. The record cannot be successfully added to the database without these fields

The information needed to populate these fields can be found on the Volunteer Consent Form (DHS 3466)

The lookup link next to the SMT and OLS fields will open up a .pdf that explains the proper codes to be used.

WebLEDS MHS
(Medical Health Database)

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Leds ID:

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Inquiry

ORI:

ORI Number

At Least One Identifier Required:

NAM:

Name (Last,First M)

DOB:

- NAM must be specified

Date of Birth (YYYYMMDD)

LNU:

LEDS Number

SOC:

Social Security Number

OLN:

Operator License Number

OLS:

Operator License State

Submit

Show Transaction

Clear Form

The Inquiry screen allows the operator to search the database for a client. The operator can search by name, date of birth (DOB), LEDES Number (LNU), Social Security Number (SOC), Operator License Number (OLN) or Operator License State (OLS).

This will be useful to the operator to find out the client's LEDES Number (LNU) after the client has been entered into the database. A LNU will only be issued after the initial entry.

WebLEDS MHS
(Medical Health Database)

User Information

User ID: kmedical
Leds ID: LE65

Responses

View Responses

Record Management

Inquiry

Entry

Modify

Cancel

Add Supplemental Info

Delete Supplemental Info

Add Contact

Delete Contact

Account Management

Display Sent/Recv Log

Change Screen Colors

Change Password

Logoff the System

10/28/10 - 14:10:02.79 - QLW OR024015Y NAM MEDICAL LEDS TEST DOB 10251971 INV ALL

Delete

Print

L1W04950000.REUR 0495 LEDS
QLW.OR024015Y.NAM/MEDICAL,LEDS TEST.DOB/10251971.INV/ALL

*** MULTIPLE RECORDS ***
MEDICAL RECORD (BASED ON DOB,NAM)
EIP OR036MHD0 NAM/MEDICAL,LEDS TEST DOB/1971/10/25
SEX/U RAC/U POB/ HGT/502 WGT/135 EYE/BRO HAI/BRO SKN/
OCA/1234567
OLN/1234567.OR.2011

RECORD INFORMATION
DOR/2010/10/28 RTP/MED
MIS/MENTAL

ASSOCIATED ADDRESSES
DMV ADDRESS
ADR/4765 PULLMAN AVE SE
CITY/SALEM ST/OR ZIP/97302 DAC/2010/10/28

ENT: 2010/10/28 AT 1112 FROM LE65 BY/YAMHILL CO MENTAL HEALTH PROG ()
PURGE DATE: NOT PURGEABLE
LNU/W034840078 RECORD IN NCIC/NO

POSSIBLE MATCHES ON NAM/MEDICAL,LEDS TEST.DOB/1971/10/25

EIP OR024015Y NAM/MEDICAL,LEDS TEST RTP/MED
1969/09/09 F W 600 159 GRN LNU/W004790957

Received on 10/28/10 at 14:10:02

To view the response to an Inquiry, choose the View Responses button.

The LNU (LEDS Number) can be found on the response.

The operator has the ability to delete and/or print the responses.

After each entry, modification, addition to a record and deletion the operator is required check the responses to ensure the transaction was accepted.

WebLEDS MHS (Medical Health Database)

User Information

User ID:
Leds ID:

Responses

View Responses

Record Management

Inquiry

Entry

Modify

Cancel

Add Supplemental Info

Delete Supplemental Info

Add Contact

Delete Contact

Account Management

Display Sent/Recv Log

Change Screen Colors

Change Password

Logoff the System

Modify

ORI: ORI Number
NAM: Name
OCA -or- LNU is required:
OCA: Originating Agency Case Number
LNU: Leds Number

Fields to be Modified (Enter "*" in Field to Delete):

ORI: New Originating Agency Case Number
NAM: New Name (Last,First M)
OCA: Originating Agency Case Number
DOB: Date of Birth (YYYYMMDD)
HGT: Height
WGT: Weight
EYE: -- select -- Eye Color
HAI: -- select -- Hair Color
SMT: -Lookup Scars, Marks and Tattoos
SOC: Social Security Number
OLN: Operators License Number
OLS: -Lookup Operators License State
OLY: Operators License Year (YYYY)
DOR: Date of Record (YYYYMMDD)

MIS:

Submit

Show Transaction

Clear Form

To modify information on a record already in the system the name of the client is needed along with either the Originating Agency Case Number (OCA) or the LEDS Number (LNU).

Only the fields that need to be modified are to be filled out.

WebLEDS MHS
(Medical Health Database)

User Information

User ID:
Leds ID:

Responses

View Responses

Record Management

Inquiry

Entry

Modify

Cancel

Add Supplemental Info

Delete Supplemental Info

Add Contact

Delete Contact

Account Management

Display Sent/Recv Log

Change Screen Colors

Change Password

Logoff the System

Cancel

ORI:

ORI Number

NAM:

Name

OCA -or- LNU is required:

OCA:

Originating Agency Case Number

LNU:

Leds Number

DOC:

Date of Cancel (YYYYMMDD)

Submit

Show Transaction

Clear Form

To cancel a record, remove it from the database as an active record, the name of the client is a required field along with either the Originating Agency Case Number (OCA) or the LEDS Number (LNU). The date the record is being canceled is also a requirement.

WebLEDS MHS
(Medical Health Database)

User Information

User ID:
Leds ID:

Responses

View Responses

Record Management

Inquiry

Entry

Modify

Cancel

Add Supplemental Info

Delete Supplemental Info

Add Contact

Delete Contact

Account Management

Display Sent/Recv Log

Change Screen Colors

Change Password

Logoff the System

Add Supplemental Info

ORI:

ORI Number

NAM:

Name

OCA -or- LNU is required:

OCA:

Originating Agency Case Number

LNU:

LEDS Number

CONTACT INFO 1 - Must be entered as a set:

CTYP1: -- Select --

Contact Type - required

NAM1:

Contact Name - required

PHO1:

Contact Phone - required

EXT1:

Contact Extension - optional

REL1:

Contact Relationship - optional

CONTACT INFO 2 - Must be entered as a set:

CTYP2: -- Select --

Contact Type - required

NAM2:

Contact Name - required

PHO2:

Contact Phone - required

EXT2:

Contact Extension - optional

REL2:

Contact Relationship - optional

CONTACT INFO 3 - Must be entered as a set:

CTYP3: -- Select --

Contact Type - required

NAM3:

Contact Name - required

PHO3:

Contact Phone - required

EXT3:

Contact Extension - optional

REL3:

Contact Relationship - optional

The Add Supplemental Info screen is available to add the contact information found on the Volunteer Consent Form (DHS 3466).

The Primary Care Physician, Case Manager, Probation Officer and Emergency Contact information can be added to the client's record.

The drop-down selection allows the operator to distinguish which type of contact it is.

Up to four contacts can be entered.

WebLEDS MHS
(Medical Health Database)

User Information

User ID:
Leds ID:

Responses

View Responses

Record Management

Inquiry

Entry

Modify

Cancel

Add Supplemental Info

Delete Supplemental Info

Add Contact

Delete Contact

Account Management

Display Sent/Recv Log

Change Screen Colors

Change Password

Logoff the System

Delete Supplemental Info

ORI:

ORI Number

NAM:

Name

OCA -or- LNU is required:

OCA:

Originating Agency Case Number

LNU:

Leds Number

CTYP1: -- Select --

Up to 4 Contacts may be removed

CTYP2: -- Select --

Up to 4 Contacts may be removed

CTYP3: -- Select --

Up to 4 Contacts may be removed

CTYP4: -- Select --

Up to 4 Contacts may be removed

Submit

Show Transaction

Clear Form

The Delete Supplemental Info screen allows the operator to remove contact information that is no longer valid.

WebLEDS MHS
(Medical Health Database)

User Information

User ID:
Leds ID:

Responses

View Responses

Record Management

Inquiry

Entry

Modify

Cancel

Add Supplemental Info

Delete Supplemental Info

Add Contact

Delete Contact

Account Management

Display Sent/Recv Log

Change Screen Colors

Change Password

Logoff the System

Add Contact

ORI: ORI Number
LNU: Leds Number
OCA: Originating Agency Case Number
NAM: Name
ATYP: SHOM = Subject Home Address Address Type

Address Information:

SNU: Street Number (not used for PO Box)
SNA: Street Name (or PO Box)
CITY: City
STE: State Code
ZIP: Zipcode
PH1: 1st Phone Number
PH2: 2nd Phone Number
PH3: 3rd Phone Number

Submit Show Transaction Clear Form

The Add Contact screen allows the operator to add the client's last known address. This information can be found on the Volunteer Consent Form (DHS 3466).

WebLEDS MHS
(Medical Health Database)

User Information

User ID:
Leds ID:

Responses

View Responses

Record Management

Inquiry

Entry

Modify

Cancel

Add Supplemental Info

Delete Supplemental Info

Add Contact

Delete Contact

Account Management

Display Sent/Recv Log

Change Screen Colors

Change Password

Logoff the System

Delete Contact

ORI:

ORI Number

LNU:

Leds Number

OCA:

Originating Agency Case Number

NAM:

Name

ATYP:

Address Type

Submit

Show Transaction

Clear Form

The Delete Contact screen allows the operator to delete the client's last known address.

CONTACTING LEDS

Log In Information

(503) 378- 3055 ext 55021

LEDS Training

(503) 378-3055 ext. 55013

TRAINING.LEDS@STATE.OR.US