Last updated: 2/26/2020

This tip will focus on duplicate EBP cases in PIE and what to do if in error, a child has more than one treatment model intake. *Most situations do not require opening a new EBP case.*

Situations that may require more than 1 EBP intake:	Situations that require only 1 EBP intake:
• The child leaves treatment for a long period of time and restarts the EBP • The child starts a new EBP (i.e., clinician decides to change model from MATCH to TF-CBT) • Agency Policy/Guidelines related to closing cases (i.e., policy states episodes must be closed after 30 days of no contact).	• A child transfers clinicians and continues treatment • A child isn't seen for a short period of time (vacation, etc.,) and resumes treatment

Outpatient and EBP Episodes Visual:

- In the above scenario, the client has 2 outpatient episodes and 3 EBP episodes across 4 years, with outpatient episode 2 currently open. In the first outpatient episode, TF-CBT is completed, and the client is discharged the next year. In the second outpatient episode, the clinician first used TF-CBT, but then changed to MATCH, initiating the new EBP treatment model intake.
- If the child is switching clinicians but continuing with the same EBP treatment, a new EBP intake should **not** be completed. Instead, your agency coordinator should initiate a Case Transfer to the new clinician, where they can continue entering data.

Please make sure you are thoroughly searching for the client. See our FAQ on PIE Episode structure if you have more questions on how to search. If you have accidentally opened a new EBP intake for the child in error, we (CHDI) can oversee these data fixes. We can delete the original EBP discharge and the new EBP intake, and then you will be able to continue entering the data under the original EBP episode.

If you have any more questions, please feel free to reach out to your CHDI Coordinator contact.