Agenda

- USTEPS Provider Interface (UPI)
  - System Overview
  - Financial Reports
  - Incident Reporting
  - System Access
Q: What is UPI?

A: It is a web-based computer system that gives the DSPD provider access to information about the people they serve. UPI can be accessed anywhere the user has a computer and an Internet connection.
Q: Who can access UPI?

A:
1. DSPD Employees
2. Providers in good standing with the Department of Human Services who have a valid, open contract with DSPD to serve People receiving supports and services.

Q: Who should access UPI?

A: Each provider will have to decide which of their employees should have UPI access. Then they will need to complete a set of documents / security access forms that explain the requirements, expectations, and agreements for using the UPI Package.
Q: What consumers can the provider see?

A: Consumer data is controlled by the Person Centered Support Plan (PCSP). If the provider delivers a service listed on the PCSP budget, then they can use UPI to access the consumer’s information.

Q: Can a provider see details about services a different provider is delivering to the consumer in UPI?

A: The provider can only see payment history and other related information / statistics about the services they deliver to the consumer.
Q: Can we separate access to the Financial Information from the Incident Reporting information?

A: Yes. Roles are used to separate “financial” from “incident report” access.

UPI

- **Main Screen**
  - **Caseload**
    - Sorting and filtering
  - **Tabs**
    - Home
    - Sign Out
    - Caseload Reports Tab
      - Incident Reports
      - Provider Reports
        - Financial Reports
      - CAPS
        - Payment Search
        - 520s
UPI

- Selected Person
  - Main Consumer Screen
    - Demographics

- Consumer Tab
  - Consumer Reports
    - Financial
      - Consumer Budget
      - Consumer Budget (Previous Plan)
      - Consumer Form 1056
    - Incident Reports

UPI Main Screen
Selecting a Person

Selected Person Main Screen

Consumer Main

Personal Information
Name: Ch Alvine
Birth Date: 01/03/1991

Addresses
Residence: 1574 address 2 SLIC UT 84116
Mailing:

Phone Numbers
Name: 801-538-4100

Caseworker Information
Caseworker Name: Ro Morgan
Caseworker Phone: 435-660-9486
Caseworker Email: ustepsvsstate.gov

Contacts

Eligibility Type: ID

Current Services

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Professional:

Relationship: Other
Name: Ro Morgan
Phone Number: 801-538-4100
Five Minute Break

Incident Reporting
Let’s get started

What are incidents?

Why is incident data important?
According to the Department of Health (DOH), what must waiver programs provide?

"Waiver programs must provide adequate and appropriate services that safeguard the health and welfare of all enrolled participants. Waiver programs must also assure financial accountability for funds expended...."

We need to:

1) assure that appropriate actions have taken place when a critical incident or event occurs;

2) in cases where appropriate safeguards were not in place, assure that an analysis is conducted and appropriate strategies have been implemented to safeguard consumers.

DSPD Authority and Responsibility

Statute:

Title 62A Chapter 5, Subsection 103(2) states: “The Division has the authority and responsibility to:

(e) supervise the programs and facilities operated by, or under contract with, the division;

(l) establish standards and rules for the administration and operation of programs conducted by, or under contract with, the division;”

Title 62A Chapter 5 Subsection 105(1) states: “The Division shall:

(a) establish program policy for the division, the developmental center, and programs and facilities operated by or under contract with the division;”

Rule:

Rule is limited in reference to incident reporting. Where it does apply, it will be referred to under the incident. As it applies to Self-Administered Services (SAS), R539-5-6 requires the person, their representative or a provider agency to report to the case manager any time a person's health or safety is jeopardized.
Types of Incidents

These incidents do not need to be submitted to DSPD, unless you feel it needs to be brought to our attention.

- Missing person - less than two hours
- Property destruction - less than $500.00
- Aggression - no injuries or no law enforcement involvement
- Missed medications - no adverse side effects
- Medication errors - no medical treatment
- Non-compliance
- Self-injurious behaviors - no medical treatment
- Injuries requiring first aid
- Outpatient surgeries or medical procedures
- Diagnosed seizures
Level III Incidents

- Missing - two hours to 24 hours
- Injuries - requiring medical treatment
- Self-injurious behaviors - requiring medical treatment
- Hospitalization - medical/psychiatric reasons
- Abuse or neglect - no medical treatment
- Property destruction - more than $500.00
- Drug and alcohol abuse
- Suicide threats
- Aspiration or choking - Heimlich Maneuver
- Emergency behavioral interventions as defined in R539-4-6
- Behavioral interventions listed in the consumer’s Behavior Support Plan
- Law Enforcement Involvement - no charges file
- Seizure type activity - no diagnosis

Level II Critical Incidents

- Abuse or neglect - resulting in medical treatment
- Exploitation of the consumer's funds
- The consumer’s working or living environment is compromised - requiring evacuation
- Activities perpetrated by the consumer-resulting in charges being filed
- Medication errors - resulting in medical treatment
- Injuries, aspiration or choking-consumer is admitted to the hospital
- Suicide attempts - consumer is not admitted to the hospital

DSPD is responsible for the investigation, resolution and closure of Level II Critical Incidents.
Level I Critical Incidents

- Abuse or neglect - consumer is admitted to the hospital
- Suicide attempts - consumer is admitted to the hospital
- Human rights violations such as the unauthorized use of restraints, seclusion rooms or infringement of person's privacy rights experienced by the consumer
- Incidents that have or are anticipated to receive public attention
- Medication errors - consumer is admitted to the hospital
- Consumer - missing for at least twenty-four hours; or regardless of the number of hours missing, any consumer who is missing under unexplained, involuntary or suspicious circumstances and is believed to be in danger because of age, health, mental or physical disability, environment or weather or who could be in the company of a potentially dangerous person or some other factor that places the consumer in peril.
- All deaths are unexpected except: a) consumers receiving hospice care; and/or b) deaths due to natural causes, general system failure or terminal/chronic health conditions
- Serious burns, self-injurious behaviors or injuries resulting in loss of physical or mental function, resulting in consumer being admitted to the hospital
- Incidents that involve alleged or confirmed waste, fraud or abuse of Medicaid funds by provider or recipient of Medicaid services.

DOH is responsible for the investigation, resolution and closure of Level I Critical Incidents.
What incidents do I report to DSPD?

For the past year we have been asking the Support Coordinators (SCs) and Administrative Case Managers (ACMs) to send us incident reports on all incidents. This year we are requesting incident reports on the following:

- Incidents (only if you feel DSPD needs to be made aware of them.)
- Level III Incidents
- Level II Critical Incidents
- Level I Critical Incidents

Incident Notification

When filling out the incident notification please:

- Provide us with as much information as you can.
- If you’re going to submit an incident that does not have to be reported to DSPD, please offer an explanation as to why you feel this needs to be brought to our attention.
- Review the notification before submitting it.
Incident Report

- Must be submitted within five business days.
- Provide as much information as you can in the incident description.
- Fill out all of the screens that are applicable to the incident you are reporting.
- Required fields have to be populated before submission.
- Review the incident report before submitting it.

SC/ACM Follow-Up

SCs/ACMs will be reviewing the incident reports and will be determining if:

- the team may need to meet
- prevention strategies need to be developed
- behavior supports may be needed
- a RAS request may need to be submitted
- the consumer’s PCSP, Behavior Support Plan or his/her Supervision Guidelines may need to be modified
- a face-to-face visit should be made
- if other recommendations and/or referrals may need to be made, etc.
Critical Incident Investigation

- SCs/ACMs will be responsible for completing Critical Incident Investigations.
- They will have ten business days to complete the investigation.
- They may ask Providers / Family for information in order to complete the investigation.
- Required fields have to be populated before submission.
- Review the investigation before submitting it.
- DSPD forwards Level I Critical Incident Investigations to the DOH.

Additional Follow-Up Questions

- DSPD and DOH may issue follow-up questions
- Follow-up questions can be sent on incident reports, as well as, investigations
- DSPD sends out all of the follow-up questions
- We anticipate you will have five business days to respond to them.
Investigation Closure

- DSPD completes Level II Critical Incident Investigations
- DOH completes Level I Critical Incident Investigations
- When an investigation is closed, it will be noted in USTEPS.
- The completed investigation will be found in USTEPS.
- The consumer or his/her guardian will receive a letter informing them that the investigation has been completed.

Incident Report Business Process

Incident Reports
Incident Report Business Process

### Incident Number
- **Incident Number**: ZRC
- **Incident Date/Time**: 02/06/2014 06:59 PM

### Brief Description

### Provider Information
- **Provider Name**: Other
- **Provider ID**: 308

### DGPO Notification
- **DGPO Notification Date**: 02/06/2014 07:04 PM
- **Who Notified DGPO**: Other

### Support Coordinator
- **Support Coordinator Notified Date/Time**: 02/06/2014 07:04 PM

### Incident Details

### Location Information
- **Location Street 1**: Other
- **Location Street 2**: Other
- **Location City**: Other
- **Location State**: Other
- **Location Type**: Other

### Incident Description and Detail
- **Incident Description and Detail**: Other
- **Incident Description**: Other
- **Incident Category**: Other
- **Incident Involved**: Other

### Additional Details
- **Other Details**: Other
- **Support Coordinator**: Other

### Other
- **Support Coordinator**: Other
- **Other Details**: Other
### Incident Report Business Process

#### Follow Up

**Follow UP / Additional Follow Up**

- Were Preventive Strategies Needed? **[Yes] [No]**
- Were Preventive Strategies Developed and Implemented? **[Yes] [No]**
- Is Face-to-Face Review Completed? **[Yes] [No]**

Face-to-Face Review Completion Date: 

**Submit**

#### Participant's Information

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<table>
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**Does the participant have a legal guardian?** **[Yes] [No]**

**Is there another involved representative?** **[Yes] [No]**

**Participant's Support Coordinator**

#### Incident Summary

**Please provide a detailed summary of the incident.**

#### Precipitating Events/Patters of Behavior

**Incident Report Business Process**
Automated System Notifications - Consumers (assigned worker)

- **Tasks**
  - IR detail report due
  - Investigation required (critical incidents)

- **Log Notes**
  - Initial Notification
  - IR Detail report submit
  - Investigation submit
  - Incident closed
Automated System Notifications - SCs/ACMs

- Email:
  - Initial notification (if not other notification)
  - Investigation required
  - Investigation reminder (due date if not submitted)
  - Additional followup requested

- Messages:
  - Detail IR submitted
  - Incident closed

Automated System Notifications - Providers

- Email:
  - Initial notification (if submitted by other)
  - IR Detail submitted (if submitted by other)
  - Reminder day IR Detail due
  - Investigation submitted
  - IR Closed
Tips / Things to Remember

- Don’t forget to push the “Submit” button
- Check the top of the screen to see if it was successfully submitted
- Review the “Incident Description” to make sure you’ve selected all of the incident categories
- If behavior interventions are used, list them in the “Intervention Details”, noting the duration of each intervention
- If different types of restraints were used, list them separately, noting the duration of each restraint.
- If charges are filed, list the charges, if known

Tips / Things to Remember continued

- When filling out the “Parties Notified” section please only list the individuals who are tied to the incident.
- When completing the “SC Follow Up” section, don’t forget to push the “Additional Follow Up” tab to see if you need to respond to additional questions
- If you need to add more information, after the IR has been submitted, you can put that information in the “Incident Notes”
Tips / Things to Remember continued

- Once an incident notification, incident report, or investigation has been successfully submitted it CANNOT be modified.

- Don’t forget to report suspected or known abuse, neglect or exploitation to CPS, APS or law enforcement.

System Access

Company Access
- Form 0-9 Company Access (required)
  - Company desire to use system
  - Company responsibilities
  - Company designees for access

- Activate Account in Utah Master Directory (UMD) (required)

- Form 0-8 Individual User Access (required for each user)
  - Differentiate between Financial, IR, or Both

Support Coordinator Access
- Form 0-2.........
Resources and Contacts

- UPI System
  - https://upi-prod.dhs.utah.gov/UPIWeb/

- Incident Report Team
  - dspdincidents@utah.gov
  - Laura: 801-779-6714; Joey: 801-779-6708

- USTEPS Team
  - usteps@utah.gov
  - 801-698-7431

- DSPD Web Page Reference Materials (Provider tab)
  - dspd.utah.gov
    - Access Forms
    - User Guides

IR Rollout Schedule

- Available to all providers

- Required use July 1, 2014 (contract amendment)