Support Coordinator (SC) and Administrative Case Manager (ACM)

Introduction to USTEPS Provider Interface Incident Reporting

USTEPS PROVIDER INTERFACE

State of Utah

Division of Services for People with Disabilities

Incident Reporting:

Notification

Reporting

Follow Up

Investigation

Closure

The process for incident reporting tasks are performed in the order below:

- Notification
- Report
- Level of Incident and Incident Reporting (IR) administrative team member assigned to the IR
- IR administrative team member views IR and may ask follow-up questions
- SC/ACM Follow-up
- SC/ACM Additional follow-up
- Investigation (if required – level of incident determines)
- IR administrative team member performs Closure
- Incident Notes

3/3/2014
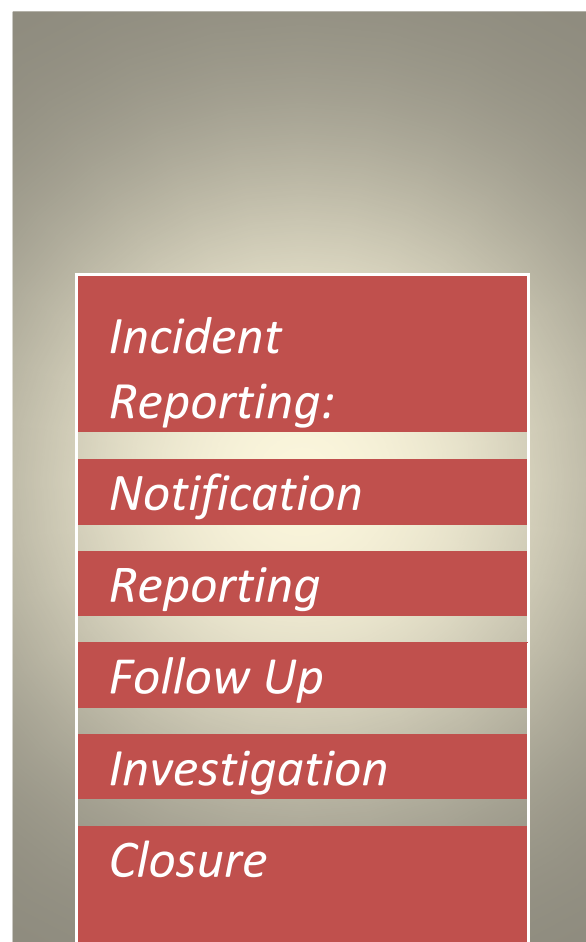
DSPD Incident Reporting

Introduction:

Support Coordinators (SC) and Administrative Case Managers (ACM) who have access to USTEPS can access Incident Reporting in one of two ways. First, by selecting a consumer from their caseload in USTEPS and then clicking on the "Incident Report" link located in on the Consumer menu. Second, if they have a UPI user account, they can log directly into UPI and access incident reports for the consumers served by their company.

Accessing Incident Reports from USTEPS

Step 1: Log into your USTEPS home page.

Step 2: Select the consumer needing the incident report or follow up.

Step 3: Click on the "Incident Report" link in the Consumer Menu.

Step 4: A new web browser displays all of the Incident Reports that have been submitted for the consumer.

[Note: If the logged in user does not have formal access to UPI, then its main menu is limited to displaying information only about the selected consumer carried over from USTEPS. The user does not have access to all of the consumers served by the Support Coordination Company who employs them.]

Accessing Incident Reporting From UPI

The consumers you have access to in UPI are based on two parameters:

1. The company listed on the person's Active PCSP budget.

2. The company listed on a closed PCSP for as much as one year after they stopped delivering services to the person.

Step 1: Log into UPI. The following screen will display listing all the consumers currently being served by your company.
- Search feature available in the 'Search all fields'. Input search criteria.
- Sort features are available to the right of each column heading (ascending to descending or a-z, etc.)
- Click the consumer you wish to proceed with in the IR process and then UPI Consumer's main screen displays.
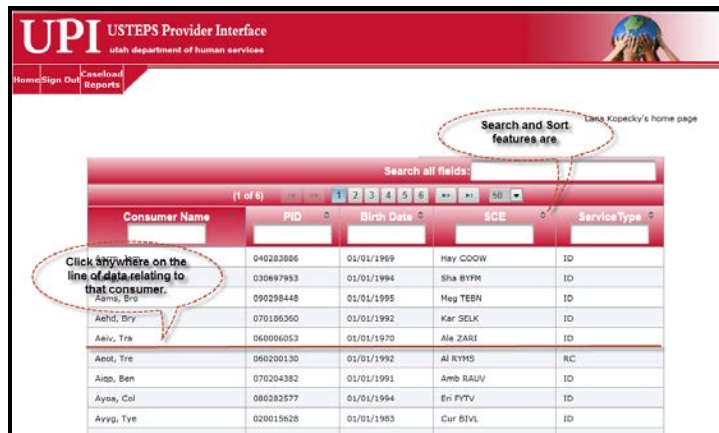
Step 2: At the Consumer's Main screen, mouse over the consumer tab and click on the "Incident Report" link.

Step 3: Select the desired Incident Report from the consumer level "Incident Report" screen.
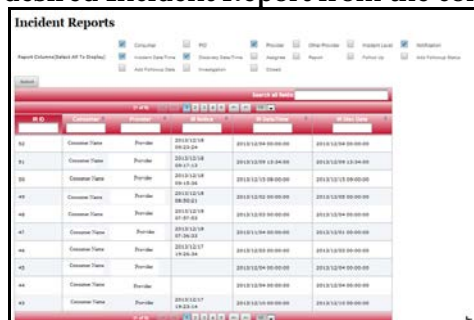
[Note: Given that the logged in user does have formal access to UPI, they can access all of the Incident Reports submitted for all of the consumers served by the Support Coordination Company who employs them.]
The data table on the Main Incident Report screens can be altered to display more or less information by selecting or deselecting the desired column headings and clicking the "Select" button.

Each column is populated with its data as the Incident progresses from Notification to Closure. Selecting all of the columns will display as follows:

Sort and search features are available within each column. The following is a detailed explanation for each of these available columns (select-box):

1. Consumer – First and last name of consumer.
2. PID – Participant Identification Number.
3. Provider – Login user that entered the data.
4. Other Provider – If the login user is not auto-filled with the provider that needs to submit the Incident Report.
5. Incident Level – The level assigned by the IR Administrative team.
6. Notification – The date/time the Notification was successfully submitted.
7. Incident Date/Time – The date and time the Incident occurred.
8. Discovery Date/Time – The date and time the Incident was discovered.
9. Assignee – The IR Administrative team member the case is assigned to.
10. Report – Date the IR was successfully submitted.
11. Follow Up – Date the SC/ACM submitted the Follow Up information
12. Additional Follow Up Status (AFU Status) – Displays what the status is of the follow up tasks.
    a. *Requested* – IR Administrative Team is requesting the SC/ACM to respond to the questions prepared regarding the Incident;
    b. *Responded* – The SCE has answered all the questions regarding the incident that the IR Administrative team has requested;
    c. *Reviewed* – The IR Admin Team has reviewed the answers to the questions as requested.
13. Additional Follow Up Date – Date that the Add Follow Up Status was successfully submitted.
14. Investigation – Date the "Investigation" tab was completed by the SC/ACM.
15. Closed – Date the IR Administrative team deems the IR review has been completed, determined not reportable, or duplicate of another incident already submitted.

Each column will be auto-filled as the process continues throughout the entire incident.

Incident Reporting – Notification

- If this is a **new** Incident Notification, click the new button: **New**

- If accessing an incident notification already **successfully submitted**, you will be brought to the screen which will allow you to choose the columns so you can view the status of each report by selecting or deselecting the columns.

By clicking anywhere on the line of data pertaining to an incident, it will display all details regarding the incident, as shown on the next page.
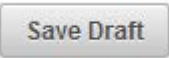
New Incident Notification*:* Enter data needed under the "Notification" tab.

The following provides a description of the requested information:

1. Incident Number – this will be auto-generated when the "Notification" is successfully submitted.
2. Incident Date/Time – If you are not sure, this may be left blank, but will be required on the "Report".
3. Incident Discovered Date/Time – Required.
4. Brief Description – Required (more detailed description will be required on the Report).
5. Provider Name – Required – Will auto-fill with the login user's company name. This entity will be responsible for submitting the "Report". Otherwise, select 'Other' and manually enter the provider.
6. DSPD Notification Date – Auto-filled with the Date/Time that the Notification was successfully submitted, but the date may be edited by the Incident Reporting Admin team if necessary.
7. Who Notified DSPD – Auto-filled with the name of the logged in user submitting the Notification, but is editable.
8. How was DSPD notified – Select from drop down list.
9. Support Coordinator Notified Date/Time – Y/N Required – If yes, today's date or actual date the SC/ACM was notified. If no, the system will auto-fill. Note: *A message will be sent to the Support Coordinator immediately upon successfully submitting the Notification. A USTEPS task will also be initiated.*

10. **Save Draft** Use this feature when you need to save the data entered, but not yet finalized. The following message will auto-fill on the top of the screen **The Incident Report Notification is successfully saved**

11. **Submit** Use this feature when everything is accurate and ready to be submitted. The following message will be displayed on the top of the screen if it was successful. Otherwise an error message will display in red indicating the required data.

The Incident Report Notification is successfully submitted

Incident Reporting - Report

Once the Incident Notification was successfully submitted, the "Notification" will be displayed as shown below: Click anywhere on the data row to access the incident report.

Click on the Report tab:

The following will display:

The following are descriptions for the requested information:

1   Incident Number: Auto assigned number assigned to Incident once the "Notification" has been submitted successfully.
2   Incident Date/Time –Required if blank – This will auto-fill if completed in the Notification.
3   Incident Detailed Description – Required – This is a detailed description of the incident.
4   Location Street 1 – Required – Exactly where the incident took place.
5   Location Street 2 – Additional address information, i.e., Apt, Suite.
6   Location City – Required – The city where the incident took place.
7   Location State – Required – The state where the incident took place.
8   Location Zip Code – Required – The zip code which coincides with the location.
9   Location Type – Required – Choose location type from dropdown list.
10   Location Description – Required if 'Other' or no address is in Location Street 1 – Description of where the incident took place.
11   Guardian Notified Y/N or No Guardian – If Yes, the report must include the guardian information in the Parties Notified section.
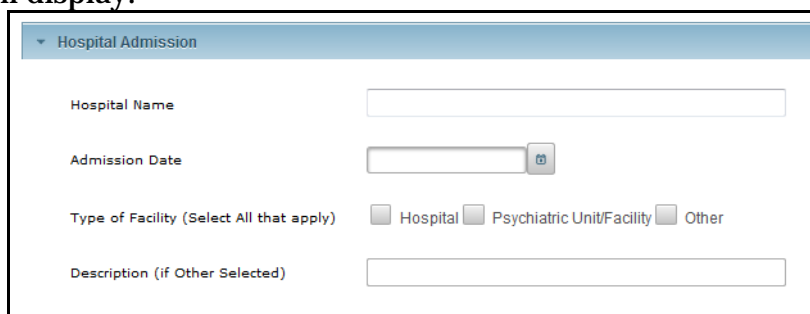
12 Incident Categories (Select all that Apply) – At least one category is required. Select all categories that apply to the specific incident. Each Category will display the necessary required information regarding the incident. Note: *If any of the categories are noted in the 'detailed incident description" they must also be checked here.* (Screen shots of these screens shown below). Category choices:

- Abuse/Neglect/Exploitation
- Aspiration/Choking
- Behavior Intervention
- Compromised Environment
- Drug/Alcohol
- Fatality
- Injury
- Medication Errors
- Missing Person
- Property Destruction
- Seizure
- Suicide attempt
- Other

13 The "Incident Involved (Select all that Apply)" – Required if the incident involved 'Hospital Admission', 'Law Enforcement', or any 'Medical Care'. All sections are required to be selected/clicked/or answered.
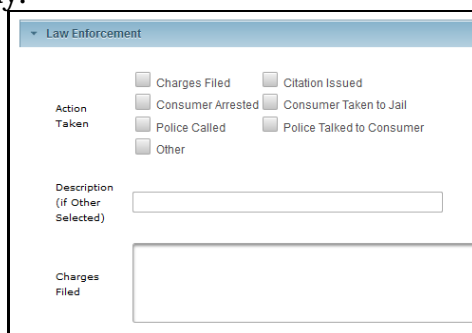
If you select "Hospital Admission", and click on the hospital admission panel, the following section will display:

If you select "Law Enforcement", and click on the law enforcement panel, the following section will display.

If you select "Medical Care", and click on the medical care panel, the following section will display:

14   People involved – Information for all individuals involved and what their role was in regard to the incident.

15   Parties notified – Information for all parties, agencies, guardian, etc. that were notified regarding the incident.

In the following example, note the "Incident Categories" that are selected are displayed in the listing. When clicked, the screen will be displayed with the questions to collect the data necessary for the incident.

The following are screen shots of each "Incident Category" showing the necessary information for each.

Depending on the answers selected, more questions may appear that are required to be answered.

Abuse/Neglect/Exploitation

Aspiration/Choking

Aspiration/Choking

Type of Incident   [▼]

Aspirated/Choked
Item (Select All   ☐ Food ☐ Liquid ☐ Object
that Apply)

Action Taken

Behavior Intervention

Behavior Intervention

Intervention
Circumstances

Intervention
Justification

Intervention   ☐ Aggression Toward Other People ☐ Aggression Toward Staff ☐ Aggression Toward Consumer(s)
Cause   ☐ Property Destruction   ☐ Self-Injurious Behavior   ☐ Other

Description (if
Other
Selected)

Intervention
Start
Date/Time

Total
Intervention   0 ▲▼
Duration
(Minutes)

+ Interventions Details

Total Intervention Time in Past 30 days (Minutes)   0   Total Incidents in Past 30 days   0

— Interventions Details

Intervention   Description
Used   [▼]   (if Other
                                    Selected)

Intervention   Intervention
Duration   [▲▼]   In Plan   ○ Yes ○ No
(Minutes)

Notes   [   ]

[Save] [Delete] [Clear]

Intervention Used	Description (if Other Selected)	Intervention Duration (Minutes)	Intervention In Plan	Notes

Total Intervention Time in Past 30 days (Minutes)   0   Total Incidents in Past 30 days   0

Compromised Environment

Compromised Environment

Compromised Environment Type [▼]

Action Taken [▼]

New Location (If Applicable) [   ]

Drug/Alcohol

Drug/Alcohol

Type of Substance (Select All that Apply)
☐ Alcohol ☐ Illegal Drugs ☐ Over Counter Medication
☐ Prescription Medication ☐ Other

Description (if Other Selected) [   ]

Did the Consumer Appear to be Impaired ○ Yes ○ No

Did the Consumer Overdose ○ Yes ○ No

Fatality

Fatality

Fatality Status [▼]

Was the consumer receiving hospice care? ○ Yes ○ No

Unexpected Fatality Cause [▼]

Description (if Other Selected) [   ]

Injury

Injured Body Parts (Select All that Apply)

- ☐ Abdomen
- ☐ Left Ankle
- ☐ Right Ankle
- ☐ Back
- ☐ Left Arm
- ☐ Right Arm
- ☐ Buttocks
- ☐ Left Foot
- ☐ Right Foot
- ☐ Chest
- ☐ Left Hand
- ☐ Right Hand
- ☐ Face
- ☐ Left Knee
- ☐ Right Knee
- ☐ Genitals
- ☐ Left Leg
- ☐ Right Leg
- ☐ Head
- ☐ Left Shoulder
- ☐ Right Shoulder
- ☐ Neck
- ☐ Left Wrist
- ☐ Right Wrist
- ☐ Other

Description (if Other Selected)

Consumer's Role

Self-Inflicted Injury ◯ Yes ◯ No

Self-Inflicted Injury Description

Medication Errors

Medications Involved

Medication Error Type
☐ Missed Dose ☐ Overdose ☐ Under Dose ☐ Wrong Medication ☐ Other

Description (if Other Selected)

Consumer Appear to have an Adverse Reaction ◯ Yes ◯ No

Adverse Reaction Description

Missing Person

Property Destruction

Seizure

Suicide Attempt

Other

An attempt has been made to have the categories listed above inclusive of most incidents.

If 'Other' is selected, data required will be included in "People Involved", "Parties Notified" and "Incident Detailed Description".

Follow-up will be required with each "Report" with the IR Administrative team via SC/ACM.

Important items to keep in mind:

If the 'Submit' button does not gray out, check at the top of the page for the error message detailing what other information is needed.

If you do not have UPI access, then you will need to go to the Incident Report through the selected consumer process in USTEPS.

When you receive the secured email regarding the IR "Report" being submitted, this is your queue that you need to complete the "SC Follow Up" tab.

All steps must be followed in order to keep the incident moving forward.

Incident Reporting - Support Coordinator Follow Up

When an Incident notification and report are successfully submitted by a Provider, the SC will receive a secure email informing the Support Coordinator that there has been an incident involving one of their assigned consumers.

Part 1:

The following is a list of secure emails communicating to the SC the status of the Incident.

<div align="center">

1 Incident Notice
2 Incident Report
3 Incident Follow Up
4 Incident Additional Follow Up
5 Incident Additional Follow Up (These emails will continue until the data collected is adequate.)
6 Incident Closure
7 Investigation

</div>

This email indicates that an Incident <u>Notification</u> has been successfully submitted:

SM: Incident Report - Incident Notice Submitted to DSDP 📙 Inbox x

usteps@utah.gov
to me ▾

Lana Kopecky created an incident notification for *Consumer's Name* on 12-23-2013 01:27 PM
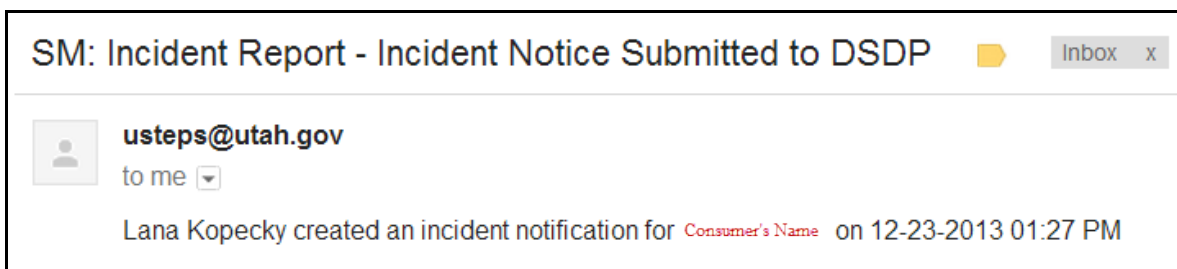
This email indicates that an Incident <u>Report</u> has been successfully submitted and support coordinator follow up is required at this time:

SM: Incident Report Submitted to DSDP 📙 Inbox x

usteps@utah.gov
to me ▾

Lana Kopecky submitted an incident report for *Consumer's Name* on 12-23-2013 01:31 PM
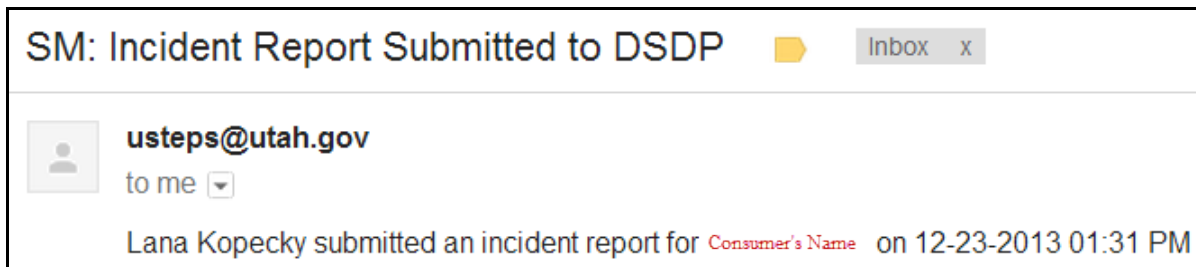
Part 2:

The IR Administrative team member will review the IR and will assign its level based on the Department of Health's policies.

Part 3:

The assigned IR Administrative team member will review all information contained in the IR and ask the SC/ACM any follow-up questions they may have regarding the incident. An email will be sent indicating that Follow Up Questions need to be addressed. The email will contain the IR number, as well as, the consumer's name.

Support Coordinator Follow-up:

Go to the SC Follow Up tab:

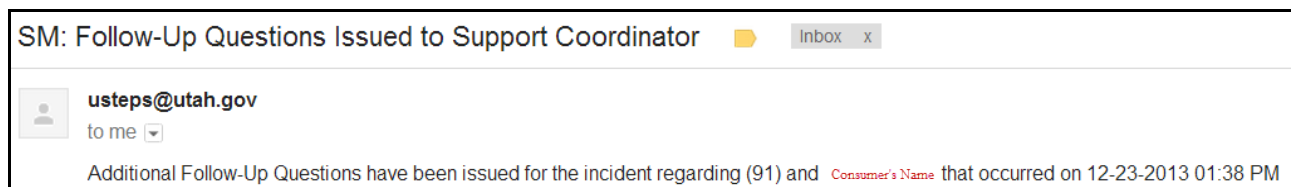The following screen is required to have all questions answered. Some waivers require a mandatory face-to-face review.

Once you have entered the data requested, click Submit.

Support Coordination Additional Follow up:

If the IR Team member has additional questions regarding the incident, the SC will be notified via a secure email.

To 'Respond' to the Follow-Up Questions, go to the SC Follow Up tab:

Then click on Additional Follow Up tab:

As shown in the following diagram, click on each question the IR team has asked and answer each question as thoroughly as possible in the text box. Then click the Add Response button to finish each response.

Steps *(as shown above)*:
1   Click on the question
2   The question you have clicked on asking for further clarification of the incident is displayed in the "In Progress List".
3   Click in the text box and answer the question as thoroughly as possible.
4   After each response, click the "Add Response" button, and then click the next question.
5   When you have entered all responses to the questions, click "Submit Follow Up Response".

The Incident Report Followup Question RESPONSE Data is successfully submitted.

The IR system will not allow you to submit your responses until all of the questions have been answered. If you click Submit Follow up Response before answering all the questions, then you will get the following error message:

All Questions should have a Response before Submit.

The Additional Follow-Up Status (AFU Status):

Request – SC/ACM needs to answer SC follow-up and any additional follow-up questions.

Respond – The SC/ACM has answered the follow-up questions and is ready for the IR Team member to review their responses.

Reviewed – The IR Administrative team member has reviewed the responses submitted by the SC/ACM. However, they can ask as many follow-up questions as needed (another email will be sent each time new questions are generated).

As you continue with the process, you can access the Incident Reports main screen at any time to check the status. This main screen continues to auto-fill as each of the tasks are accomplished.

Incident Reporting – Investigation

The Investigation task will be accomplished by the SC/ACM for the consumer. Each numbered section is required to be answered as thoroughly as possible. Depending how a question is answered, additional questions may become required. The additional questions are dynamically displayed.

4.Participant's Health/Medical Issues

Participant's diagnoses and any other health/medical issues:

ID

Medication Name: [ ]

Dosage: [ ]

Frequency: [ ]

[Add] [Delete] [Clear]

Medication	Dosage	Frequency
Medication Name	How Much	How Often

5.Post Incident Medical Assessment

The incident report provides a detailed description of the Post Incident Medical Assessment:
○ Yes ◉ No

After the incident, the participant was evaluated by a nurse or a physician to determine the need for medical attention?
○ Yes ◉ No

Please explain why no evaluation was done.

Test

6.Referral to CPS/APS/Law Enforcement

Is this a case of suspected abuse, neglect or exploitation? ○ Yes ◉ No

7.Behavior Support Plan

The participant has a behavior support plan. ○ Yes ◉ No

8.Human Rights Restrictions

Does the participant have any human rights restrictions? ○ Yes ◉ No

▾ 9.Services at the Time of the Incident

Were any service(s) scheduled for the participant at the time of the incident?

○ Yes ● No

▾ 10.Changes to the Service Plan

Will changes be made to the service plan?   ○ Yes ● No

Will any new interventions or strategies be implemented?   ○ Yes ● No

▾ 11.Additional Reviews or Investigations

Did the incident trigger a review by another agency?   ○ Yes ● No

▾ 12.Process Improvements

Please describe any opportunities to improve processes that will be implemented as a result of the analysis of this incident/event. Please include training opportunities, policy changes, etc:

Planning to improve testing.

The following "Investigation Completed by (Names and Titles)": should contain the name and titles of the person(s) filling out the investigation. The date is auto-filled.

Investigation completed by (Names and Titles):

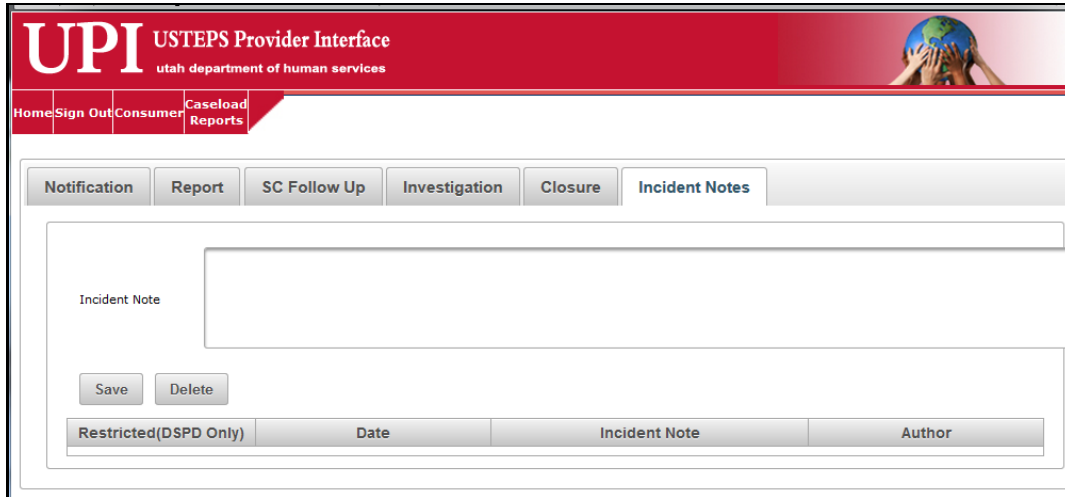Lana Kopecky, Sr. Business Analyst

Date: 12/23/2013

The IR Administrative team member is the only entity that can close an IR, and that process cannot be accomplished until all steps are completed and successfully submitted.

Incident Reporting – Incident Notes

Anyone who can access Incident Reports for the person and write incident data can create an Incident Note for a specific incident.

Once the Incident Note has been entered, click Save and the table will auto-fill with that information.

Restricted(DSPD Only)	Date	Incident Note	Author
N	2013-12-26	This is a test, this is only a test.	Lana Kopecky

Questions and/or comments regarding application:

Email: USTEPS@utah.gov

USTEPS/UPI/IR Help Line: (801) 698-7431

Incident report questions and/or comments:

dspdincidents@utah.gov