

Children's Long-Term Support (CLTS) Children's Incident Tracking and Reporting (CITR) System Training



Division of Medicaid Services
Bureau of Children's Services
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CITR System

- CITR is built on the Wisconsin Department of Health Services (DHS) Long-Term Care (LTCare) [Information Exchange System \(IES\)](#).
- CITR is web-based and compatible with most modern web browsers.
- Chrome is the preferred browser.
- CITR can be accessed on some mobile devices.

CITR Help Desk

- Provides technical assistance to use CITR
- **Phone:** 608-224-6007 (Available Monday through Friday from 8 a.m.–4:30 p.m. Closed on weekends and holidays.)
Email: VDXCLTCIESHelp@wisconsin.gov(link sends e-mail) (include “CITR” or “Children’s Incident Reporting” in the subject line)
- Receive help with:
 - Registering for a user ID
 - Logging on to CITR
 - Problems entering information or sending an incident report to DHS

Registering for an Account and Logging In

- The county waiver agency (CWA) CLTS supervisor/lead sends [Encounter new user request form \(F-21334\)](#) to the CITR Help Desk.
- Once the account is created, the user will receive an email with a temporary password.
- When first logging in to IES, the user will be prompted to change their password.
- A link to Children's Incident Tracking and Reporting can be found on the menu within IES.

User Roles

- Waiver Agency Level 1 allows the user to:
 - Enter all incident report information.
 - Make the initial notification.
 - Submit the completed incident.
- Waiver Agency Level 2 allows the user to:
 - Enter all incident report information.
 - Make the initial notification.
- Waiver Agency Administrator has the same security as Level 1.

LTCare IES

LTCare Information Exchange System
UAT -

Welcome, BobCWA2 Kiel

Home
Submit Prod File
Reports
Change Password
Data Dictionary
Documentation
Edit Library
FAQ
Support Information
User Management
User Management Guide
User Permissions
Restrictive Measures
CITR
Logout

LTCare Information Exchange System Change Password

Username:

Current Password:

New Password:

Confirm New Password:

NOTE: Your new password must contain at least 2 of the following character classes: lowercase letters, uppercase letters, digits, and punctuation / special characters, and be at least 6 characters long.

Change Password

Navigating the Dashboard

Children's Incident Tracking and Reporting (CITR)

Logout

Dashboard

Create a New Incident

Legacy Incident Data

Reports

My Incidents

Draft12

In Progress8

Pending1

State Review5

Certified4

Unlocked7

Incidents

Agency Participants

Search:

First Name

Last Name

Worker First Name

Participant ID

Date of Birthmm-dd-yyyy

Worker Last Name

Clear

Search

Display:

☒ My Incidents

☐ All Incidents

Filter(s):

☒ DRAFT

☒ IN PROGRESS

☒ PENDING

☒ STATE REVIEW

☐ CERTIFIED

☒ UNLOCKED

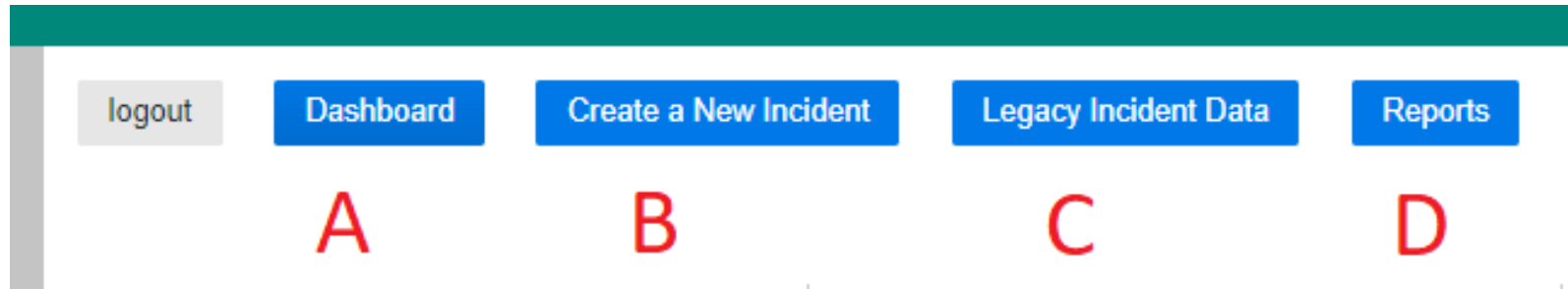
Apply Filters

Show10entries

Search

DHS Reviewed by	Incident ID	Participant Name	Participant ID	Waiver Agency Name	Status	Created Date	Last Updated Date	Assigned Worker	Entry Worker	History	Inactive
	201943	Tester M. Tester	1111111111	70000002 - CITR Test Plan 2	Unlocked	11/15/2019	12/23/2021	Kiel, Bobcwa2	Kiel, Bobcwa2	History	Inactive

Dashboard Buttons



Dashboard Buttons (cont.)

- A. Dashboard: Returns the user to the main dashboard
- B. Create a New Incident: Creates a new report
- C. Legacy Incident Data: View a list of agency reports submitted prior to the CITR system
- D. Reports: Allows the user to run reports

Incident Counts and Display Options

Children's Incident Tracking and Reporting (CITR)

logout Dashboard Create a New Incident Legacy Incident Data Reports

My Incidents

Draft 12	In Progress 8	Pending 1	State Review 5	Certified 4	Unlocked 7
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Incidents Agency Participants

Search:

First Name

Last Name

Worker First Name

Participant ID

Date of Birth


Worker Last Name

Clear Search

Display:

☒ My Incidents ☐ All Incidents

Filter by:



Incident Counts and Display Options (cont.)

- The counts of incident reports at the top of the dashboard default to display the numbers for the user's reports.
- The user can use the display toggle to switch between viewing their incidents only and all incident reports for the agency.

Incident Listing Section

Display:

☒ My Incidents

☐ All Incidents

Filter(s):

☒ DRAFT

☒ IN PROGRESS

☒ PENDING

☒ STATE REVIEW

☐ CERTIFIED

☒ UNLOCKED

Apply Filters

A

Show 10 entries

B

Search

C

D

DHS Reviewed by	Incident ID	Participant Name	Participant ID	Waiver Agency Name	Status	Created Date	Last Updated Date	Assigned Worker	Entry Worker	History	Inactive
	201943	Tester M Tested	111111111	78000002 - CITR Test Org 2	Unlocked	11/15/2019	12/23/2021	Kiel, Bobcwa2	Kiel, Bobcwa2	History	Inactive
	201944	Gfdgdfg Dfgfdgdf Gfdg	4564564564	78000001 - CITR Test 1	Unlocked	11/15/2019	12/03/2020	Kiel, Bob	Kiel, Bob	History	Inactive
	201952	Double Shot Espresso	4444444444	78000002 - CITR Test Org 2	Unlocked	11/18/2019	12/30/2019	Kiel, Bob	Hall, Justin	History	Inactive
	201990	V V	4564891029	78000002 - CITR Test Org 2	In Progress	12/02/2019	12/23/2021	Kiel, Bobcwa2	Kiel, Bobcwa2	History	Inactive
	201992	Fgdgdfgdf Gfdgdfgdfgdf	3433433433	78000002 - CITR Test Org 2	Draft	12/03/2019	12/03/2019		Kiel, Bob	History	Inactive

Incident Listing Section (cont.)

- A. The filters allow users to narrow down which reports are displayed.
- B. Clicking the Incident ID will take the user to that incident report to edit or view.
- C. Clicking the History Button will allow the user to see previous incident reports for that child.
- D. Clicking the Inactivate button can be used to remove an incident if it was created in error. (This can only be done for reports in a Draft or In Progress status.)

Incident Statuses

- Draft: The incident report has been started, but DHS has not been notified.
- In Progress: Initial notification to DHS has been made, but the report has not been completed.
- Pending: The final report has been sent to DHS but is pending substantiation results from another agency.
- State Review: Some incident types require DHS review; this status indicates that the CWA has submitted the report, and DHS is in the process of reviewing.

Incident Statuses (cont.)

- **Certified:** The incident report is considered complete; DHS has completed review if needed and the report can not be edited.
- **Unlocked:** The report has been reopened by DHS so additional information can be added.

Agency Participants Dashboard

[logout](#)[Dashboard](#)[Create a New Incident](#)[Legacy Incident Data](#)[Reports](#)

Agency Participants

Draft
12

In Progress
8

Pending
1

State Review
5

Certified
4

Unlocked
7

[Incidents](#)[Agency Participants](#)

Search:

First Name

Participant ID

Last Name

Date of Birth

mm-dd-yyyy

[Clear](#)[Search](#)

Show **10** entries

Search:

Participant ID	Participant Name	Date of Birth	Create Incident	View History	Last Incident Date	Enrollment Period	Status
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No data available in table

Agency Participants Dashboard (cont.)

- This dashboard is accessed by clicking the Agency Participants tab.
- It allows users to search for children enrolled with their agency.
- The dashboard does not list CCOP-only enrolled children.
- Enrollment information is loaded nightly from ForwardHealth (interChange).

Creating a New Incident Report

Children's Incident Tracking and Reporting (CITR)

logout

Dashboard

Create a New Incident

Legacy Incident Data

Reports

Agency Participants

Draft

5

In Progress

0

Pending

0

State Review

1

Certified

0

Unlocked

0

Incidents

Agency Participants

Search:

First Name

test

Last Name

Participant ID

Date of Birth

mm-dd-yyyy

Search

Show 10 entries

Search:

Participant ID	Participant Name	Date of Birth	Create Incident	View History	Last Incident Date	Enrollment Period	Status
111111111	Tester M Tested	01/25/2004	Create Incident	View	01/02/2020	03/06/2018-Current	Current
111111115	Testmaxwell Testcassy	01/28/2004	Create Incident	View	12/03/2019	10/01/2017-Current	Current

Showing 1 to 2 of 2 entries

Previous 1 Next

Creating a New Incident Report (cont.)

From the Agency Participants dashboard, create a new incident one of two ways:

- Click the Create Incident button by the participant's name. A new incident is created with the participant's information prefilled.
- Click the Create a New Incident button from the top menu. A blank incident is created.
 - This method is for children who are not enrolled in CLTS.
 - Search for the child by ID to ensure no duplicate is created.

Completing Initial Notification

- Required fields are marked with an asterisk (*).
- Red text denotes required fields were not completed.
- All required fields must be entered to continue.
- The Previous button returns to the previous page.
- Changes are not saved when the previous button is clicked.
- State staff are notified, and status will change to In Progress once initial notification is complete.

Initial Notification, Page 1

PARTICIPANT INFORMATION

* Indicates a required field

Participant ID *

Search

111111111

Is this a Vulnerable Child? *

☐ Yes

☐ No

Vulnerable Child is required

First Name *

TESTER

Middle Initial/Name

M

Last Name *

TESTED

Suffix

Please Select

Gender *

☐ Male

☒ Female

Date of Birth *

12-01-2797



Previous First Name

Previous Middle Initial/Name

Previous Last Name

Previous Suffix

Please Select

Initial Notification, Page 1 (cont.)

Target Group at the time of incident*

☐ I/DD ☐ SED ☐ PD

Target Group is required

Program*

☐ CLTS ☐ CCOP

Program is required

INCIDENT NOTIFICATION

Date Incident Occurred *

mm-dd-yyyy



The Date is not valid. (mm-dd-yyyy)

In what county did the incident occur? *

County is required

What agency is responsible for this Participant? *

Agency is required

Date the waiver agency was notified of incident *

mm-dd-yyyy



Date the waiver agency was notified of incident is required

Who reported the incident to the waiver agency? *

Who reported the incident is required

Download Incident

Save & Continue

Initial Notification, Page 1 (cont.)

- This page contains participant and incident information.
- The Member ID is the child's ForwardHealth Member ID or Master Client Index ID.
- The Save & Continue button is enabled when all required fields have been entered.
- The incident can be closed when the first page has been completed and saved.
- Saved incidents can be revisited from the Incidents dashboard.

Initial Notification, Page 2

PARTICIPANT CONTACT INFORMATION

* Indicates a required field

Primary Phone Number *

XXXXXXXXXX

Phone Number is required

Current Living Arrangement *

'Select'

Living Arrangement is required

Participant is legally responsible for self?

☐

Concerned Entity 1

(Parent/Guardian/Representative)

First Name

Middle Initial/Name

Last Name

Suffix

Please Select

Phone Number

XXXXXXXXXX

Concerned Entity 2

(Parent/Guardian/Representative)

First Name

Middle Initial/Name

Last Name

Suffix

Please Select

Phone Number

XXXXXXXXXX

Previous

Download Incident

Save & Continue

To protect and promote the health and safety of the people of Wisconsin

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Initial Notification, Page 2 (cont.)

- This page contains contact information.
- If the participant is over 18 with no parent or guardian to list, check the “Participant is legally responsible for self?” box.
- If an agency is the legal guardian, enter the agency name in both first and last name fields.

Initial Notification, Page 3

INCIDENT TYPE Up to three incidents types can be selected

* Indicates a required field

Type 1

Incident Type *

Incident Type is required

Incident Type Detail *

Incident Type Detail is required

Add Incident Type

PROVIDER INVOLVEMENT

Was a provider involved with the incident ? *

- ☐ Yes, a provider was involved
- ☐ No, a provider was not involved

Provider Involved is required

Provider Involvement *

Name of Provider Agency *

Initial Notification, Page 3 (cont.)

INCIDENT DESCRIPTION

Where did the incident occur ? *

Where did the incident occur is required

Incident Description *

Incident Description is required

Maximum 3000 characters

Actions taken to remediate the situation? *


Maximum 3000 characters

Actions taken to remediate the situation required

Initial Notification, Page 3 (cont.)

INCIDENT REFERRAL


Referred Date 1

Referred Date 2

Referred Date 3

Referred To 1

Referred To 2

Referred To 3

Previous

Download Incident

Save & Send to DHS

Initial Notification, Page 3 (cont.)

- This page records incident type, provider involvement, incident description, and referral information.
- Up to three incident types can be entered using the Add Incident Type button.
- Provider involvement defaults to “Yes” if the incident type is “Unapproved use of Restrictive Measures.”

Initial Notification, Page 3 (cont.)

- The incident description fields can accept up to 3,000 characters.
- Up to three referrals can be documented.
- Completing this page and clicking the "Save & Send to DHS" button satisfies the requirement to notify DHS within three business days and will send an email notification to DHS staff.

Initial Notification, Page 4

FINALIZE INITIAL SAVE

* Indicates a required field

DATA ENTRY WORKER CREDENTIALS (ARE NOT EDITABLE)

First Name

BobCWA2

Last Name

Kiel

Email

RobertJ.Kiel@dhs.wisconsin

Phone Number

(855) 852-2222

Ext

XXXX

AGENCY WORKER RESPONSIBLE FOR REPORT

Are you the agency worker responsible for this report? If you are not, please select the worker responsible below. This Field is required *

☐ Yes I am responsible

☐ No, someone else is responsible

First Name

Last Name

Phone Number

(XXX)-XXX-XXXX

Ext

XXXX

Agency Worker Responsible

'Select'

Agency Worker Responsible is required

Email

Previous

Download Incident

DHS Reviewed

Save & Continue

Initial Notification, Page 4 (cont.)

- This page contains information about the submitting and responsible workers.
- If DHS should contact someone other than the person who entered the incident, select the “No, someone else is responsible” option, then select the name of the responsible worker.

Completing Report for State Review/Certification

- The next three pages contain additional information required to complete the report.
- The CWA may attach additional documentation related to the incident.
- After completing these additional pages and clicking the Save and Notify DHS button on the final page, the Bureau of Children's Services (BCS) is notified that the report is complete.
- Once the incident is sent to DHS, agency staff cannot make updates.

Agency Completion, Page 1

ALLEGED MALTREATER

* Indicates a required field

Type 1

Is the alleged maltreater known? *

- ☐ Yes, the alleged maltreater is known
- ☐ No, the alleged maltreater is unknown
- ☐ N/A-there is no alleged maltreater

ADD MALTREATER

COURT ORDER INFORMATION

Is the participant currently under a court order? *

- ☐ Yes
- ☐ No

Participant under a court order is required

Type of Court Order *

PARENT/GUARDIAN NOTIFICATION

Is the parent/guardian aware of this incident? *

- ☐ Yes
- ☐ No


Aware Incident is required

Is the parent/ guardian the subject of the investigation? *

- ☐ Yes
- ☐ No

Investigation is required

Date parent/guardian was notified *

Agency Completion, Page 1 (cont.)

This page contains information on the following:

- Alleged maltreater.
- Court order information.
- Parent/guardian notification

Up to three alleged maltreaters can be entered by clicking the Add Maltreater button.

Agency Completion, Page 2

FINAL INCIDENT DETAILS

Was the Participant or their legal representative informed of the county waiver agency's review and response? *

☐ Yes

☐ No

This field is required

Select all persons/agencies contacted by the county waiver agency

Note any person/entity not notified and why

Type in more explanation about the incident

Maximum 3000 characters

Provide details to describe the actions and changes implemented to ensure immediate and ongoing health and safety *

Type in more explanation about the incident

Maximum 3000 characters

This field is required

Agency Completion, Page 2 (cont.)

Did this incident result in a substantiated finding of abuse by a government agency? *

Substantiating Agencies (Required if answered "Yes", up to three can be submitted)

Did this incident result in a substantiated finding of neglect by a government agency? *

Substantiating Agencies (Required if answered "Yes", up to three can be submitted)

Did this incident result in a substantiated finding of exploitation by a government agency? *

Substantiating Agencies (Required if answered "Yes", up to three can be submitted)

Date of substantiation (Required if answered "Yes")

Date of substantiation (Required if answered "Yes")

Date of substantiation (Required if answered "Yes")

Agency Completion, Page 2 (cont.)

Outcome Determination Date*

mm-dd-yyyy 

Incident outcome date is required

Remediation Action 1 *

Please Select ▼

Remediation Action 1 is required

Preventative Strategy 1 *

Please Select ▼

Preventative Strategy 1 is required

Previous

Remediation Action 2

Please Select ▼

Preventative Strategy 2

Please Select ▼

Remediation Action 3

Please Select ▼

Preventative Strategy 3

Please Select ▼

Download Incident

Save & Continue

Agency Completion, Page 2 (cont.)

- This page contains information about the following:
 - Substantiation findings.
 - Preventative strategies and Remediation actions.
 - Outcome.
- If the results of an abuse, neglect, or exploitation investigation are pending, select Pending for the corresponding question.
- A pending status allows incidents to be sent to DHS and the substantiation results may be documented later.

Pending Process

- Incidents sent to DHS with at least one substantiation question pending will remain in pending status.
- Substantiation questions may be updated by the CWA once results are received.
- Email reminders will be sent at 60 and 90 days.

Agency Completion, Page 3

Incident ID	Participant ID	Participant Name
20221819	2222222222	TEST TEST
<div>NOTIFICATION</div> <div>AGENCY</div> <div>STATE REVIEW</div> <div>CERTIFIED</div>		

UPLOAD FILE(S)

* Indicates a required field

Attach Files

Allowed file formats include: pdf, doc, docx, xls, xlsx, csv, txt, rtf, zip, jpg, jpeg, png, gif

File Name	Document Type
	Select Document Type

Document Type is required

Upload

ATTACHED FILES

Download	Document Number	File Name	Upload Date	Document Type *	Delete
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Previous

Download Incident

Save and Notify DHS

EXIT

Agency Completion, Page 3 (cont.)

- This page is for attaching documents and submitting the completed report.
- Documents can be added after the incident has been sent to DHS.
- DHS is notified that the incident is ready for final review when the Save and Notify DHS button is clicked.
- Clicking the Notify DHS button satisfies the 30-day report completion timeline.

State Review

- Some types of incident reports require review by DHS.
- If the type of incident does not require DHS review the status will be immediately set to “Certified.” If it does require review, it will be set to “State Review.”

Incident Types that Require Review

If a report includes one of the following types, it will go to State Review before certification:

- Abuse
- Neglect
- Exploitation
- Unapproved use of restrictive measures
- Death

Incident Types that Do Not Require Review

If a report has only the following types, it will be automatically certified on final submission:

- Law Enforcement Contact
- Hospitalization
- Other


State Review

- Once DHS has completed review, the agency will be notified by email.
- On the dashboard, the incident status will show as Certified or Pending.
- If the report needs to be modified, the CWA should contact the Bureau of Children's Services (BCS) Technical Assistance Center at DHSBCSTAC@dhs.wisconsin.gov or 608-267-6767 to unlock it.
- CWAs can add documents to completed reports; DHS will be notified when this happens.


Saving Incident as a PDF

INCIDENT REFERRAL


Referred Date 1

Referred Date 2

Referred Date 3

Referred To 1

Referred To 2

Referred To 3



Previous

Download Incident

Save & Continue

Saving Incident as a PDF (cont.)

- At the bottom of each page there is a “Download Incident” button.
- This button downloads the incident report into a PDF that can be printed or saved.

Reports

[logout](#)[Dashboard](#)[Create a New Incident](#)[Legacy Incident Data](#)[Reports](#)

Reports

Organization

78000003 - QTR Demo Agency X

X

▼

Start Date

End Date

mm-dd-yyyy



mm-dd-yyyy



Provider Incident Report

Summary Report

*The Start and End dates refer to the Date Incident occurred

Reports (cont.)

- Reports download in Excel format.
- Reports are run based on a user-entered date range and include incident reports that occurred with that date range.
- If a user has access for more than one agency, they can select the agencies to be included on the report.

Reports (cont.)

- The Provider Incident Report includes:
 - Only incident reports with provider involvement within the date range entered.
 - Basic information about the incident as well as information on provider involvement.
- The Summary Report includes:
 - All incident reports within the date range entered.
 - Detailed information from the incident report.

Links

- [DHS CITR Website](#)
- [User Guide](#)
- [Children's Incident Tracking and Reporting System](#)