Identify.

Report.

Protect.

Children's Incident Tracking and Reporting User Guide



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1 Introduction

The Children's Long-Term Support (CLTS) Waiver Program and Children's Community Options Program (hereafter referred to collectively as "CLTS programs") are built upon a foundation of primary program values. These values support individual choice; the enhancement of relationships; the building of accessible, flexible service systems; the achievement of optimum physical and mental health for the participant; and the promotion of presence, participation, and optimal social functioning in the community. CLTS program values further seek to ensure that children and families are treated with respect and assure that service systems empower the individual, build on their strengths, enhance individual self-worth, and supply the tools necessary to achieve maximum independence and community participation.

Incident resolution and prevention are essential to promote and support the health, safety, and welfare of children with disabilities. CLTS programs must have policies and systems in place to effectively identify, address, and seek to prevent risk to a child's health and safety with a focus on engaging in active awareness and coordinating the efforts of all people who support the child in their home and community.

1.1 Purpose of the Children's Incident Tracking and Reporting Application

The Children's Incident Tracking and Reporting (CITR) application is a secure data collection, tracking and reporting aid to support local, regional, and state staff to work as a team to identify, track, and report incidents.

- The information collected enables the Wisconsin Department of Health Services (DHS) to identify trends and create new methods that may help prevent risk to children's health and safety at the local and state level.
- The specific focus is to collect and share the information with the appropriate people to engage in active awareness and coordinating the efforts of all people who support the child in their home and community.

2 Security Roles

2.1 Security Roles

Seven different security roles are available through the LTCare Information Exchange System (LTCare IES). Access to certain features or functions on the application is determined by the security role assigned to a user. Through these different security roles, a high level of security and accountability is maintained. A list of security roles and their allowable functions is available in <u>Appendix A: Security Roles and Allowable Functions</u>.

Note: Information about setting up new users, inactivating users and managing permissions is available in the User Management Guide, which can be accessed from the menu on the left side of the LTCare Information Exchange System page. This link will only appear for users who have access to these functions.

Note: Users are recommended to use the Google Chrome or FireFox web browsers. A complete list of computing platforms with web browsers and versions supported is available in <u>Appendix B:</u> <u>Supported Web Browsers</u>. Resources for help desk support are also available in <u>Appendix C:</u> <u>Support Resources</u>.

3 Logging in for First Time

CITR account users will be required to complete the steps for multi-factor authentication (MFA) when logging in for the first time and every 60 days thereafter.

With MFA, users are asked to provide two authentication methods to verify their identity when logging in to the CITR application. MFA will protect accounts against unauthorized access in case user login credentials are compromised.

MFA will be required to log in when a user changes any of the following account information:

- Account password
- Email address

When using MFA, a user will be sent a one-time code through their choice of email, text message (SMS), or phone call.

- <section-header>
- 1. Access the CITR application at https://ltcareies.forwardhealth.wi.gov/citr.

Figure 1 Children's Incident Tracking and Reporting (CITR) Login Page

2. Click Sign in with Okta.

A Sign In box will be displayed.

ForwardHealt	h
Sign In	
Username	
Keep me signed in	
Next	
Unlock account?	
Help	
Logging in for the first time?	

Figure 2 Sign-In Box

- **3.** Enter the user's username.
- 4. Click Next.

A Verify with your password box will be displayed.

Figure 3 Verify With Your Password Box

- 5. Enter the user's password. Note: If the user's password expires when setting up MFA, a change password box will be displayed, and the user will be prompted to enter and re-enter their new password.
- 6. Click Verify.

A Get a verification email box will be displayed.

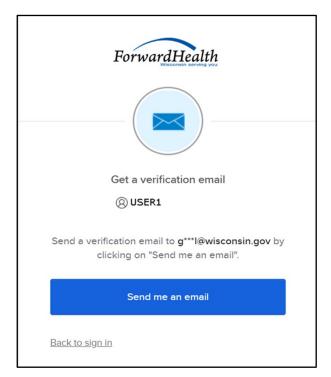


Figure 4 Get a Verification Email Box

7. Click Send me an email.

A box will be displayed indicating the email has been sent with a link to enter the code from the email.

Figure 5 Verify With Your Email Box

8. The email with the verification code sent to the user's email address also includes a Sign In link.

One-time verification code Okta <noreply@okta.com> To: User1</noreply@okta.com>	(c) ← (f) → (f)	
CAUTION: This email originated from outside of the organization. attachments unless you recognize the sender and know the conte		
Hi User1,		
You have requested an email link to sign in to LTC IES RM CITR. To the button below or enter the provided code. If you did not reque contact an administrator at <u>VDXCLTCIESHelp@wisconsin.gov</u> .		
Sign In This link expires in 10 minutes.	•	
Can't use the link? Enter a code instead: 725761		

Figure 6 One-Time Verification Code Email

- 9. The user can choose to either:
 - Click the **Sign In** link from the email.
 - Capture the verification code in the email, return to the browser window, and click **Enter** a verification code instead. Enter the code from the email and click **Verify**.

ForwardHealth
Verify with your email
() USERI
We sent an email to g***l@wisconsin.gov. Click the verification link in your email to continue or enter the code below.
Enter Code
Verify
Back to sign in

Figure 7 Verify With Your Email Box

A Set up security methods box will be displayed.

ForwardHealth
Set up security methods () USER1
Security methods help protect your Okta account by ensuring only you have access.
Set up required
Phone Verify with a code sent to your phone Used for access or recovery Set up
Back to sign in

Figure 8 Set Up Security Methods Box

10. Click Set up.

ForwardHealth
Set up phone authentication
Enter your phone number to receive a verification code via SMS.
• SMS
O Voice call
United States 🔹
Phone number
+]
Receive a code via SMS
Return to authenticator list Back to sign in

A Set up phone authentication box will be displayed.

Figure 9 Set Up Phone Authentication Box

- 11. Select SMS or Voice call for the phone authentication method.
- **12.** Enter the phone number.
- **13.** Click **Receive a code via SMS** or **Receive a code via Voice call** depending on which option is selected.

A Set up phone authentication box will be displayed.

ForwardHealth
Set up phone authentication
() USERI
A code was sent to your phone. Enter the code below to verify. Carrier messaging charges may apply
Enter Code
Verify
Return to authenticator list Back to sign in

Figure 10 Set Up Phone Authentication Box

- 14. Enter the code that was sent via text or voice call in the Enter Code box.
- 15. Click Verify.

A Set up security methods box will be displayed.

	ForwardHealth
	Set up security methods
	(O) USER1
Securit	y methods help protect your Okta account by ensuring only you have access.
Set up o	ptional
Ø	Okta Verify Okta Verify is an authenticator app, installed on your phone, used to prove your identity Used for access Set up
	Continue
Back to s	lign in

Figure 11 Set Up Security Methods Box

16. Click Continue.

 $\ensuremath{\textbf{17}}$. MFA will be set up and the user will be signed in to the CITR application.

3.1 Reset Password

- **1.** Access the CITR application.
- 2. Click Sign in with Okta.

A Sign In box will be displayed.

ForwardHealth	
Sign In	
Username	
Keep me signed in	
Next	
Unlock account?	
Help	
Logging in for the first time?	

Figure 12 Sign In Box

- **3.** Enter the user's username.
- 4. Click Next.

	Verify with your password
	(8) USER1
Passw	ord
	Verify

A Verify with your password box will be displayed.

Figure 13 Verify With Your Password Box

5. Click Forgot password? Note: Do not enter a password here.

A Reset your password box will be displayed.

	ForwardHealth
	Reset your password
Verify wi	th one of the following security methods to reset your password.
	Email g***l@gainwelltechnologies.com
C	Phone +1 XXX-XXX-8758
Back to s	ig <u>n in</u>

Figure 14 Reset Your Password Box

6. Click **Select** to receive a verification via email or phone.

- If the user clicks **Select** for email:
 - a. A Get a verification email box will be displayed.

ForwardHealth
Get a verification email
() USER1
Send a verification email by clicking on "Send me an email".
Send me an email
Verify with something else
Back to sign in

Figure 15 Get A Verification Email

b. Click **Send me an email**. Note: The user also has the option to select **Verify with something else**, which will take them back to the Unlock account box, or **Back to sign in**, which will take them back to the sign in page.

ForwardHealth
Verify with your email
Ø USER1
We sent an email to g***1@gainwelltechnologies.co m. Click the verification link in your email to continue or enter the code below.
Enter a verification code instead
Verify with something else
Back to sign in

A verify with your email box will be displayed and an email will be sent.

Figure 16 Verify With Your Email Box

c. Proceed to <u>Step 7</u>.

• If the user clicks **Select** for phone:

a. A verify with your phone box will be displayed.

ForwardHealth
Verify with your phone
(B) USER1
Send a code via SMS to your phone. Carrier messaging charges may apply
Receive a code via SMS
Receive a voice call instead
Verify with something else
Back to sign in

Figure 17 Verify With Your Phone Box

b. Click **Receive a code via SMS** (text) or **Receive a voice call instead**. Note: The user also has the option to select **Verify with something else**, which will take them back to the Unlock account box, or **Back to sign in**, which will take them back to the sign in page.

ForwardHealth	
Verify with your phone	
USER1 A code was sent to +1 XXX-XXX-8758 . Enter the code below to verify.	
Carrier messaging charges may apply	
Enter Code	
	J
Verify	
Verify with something else	
Back to sign in	

A Verify with your phone box will be displayed.

Figure 18 Verify With Your Phone Box

- c. Enter the code that was sent.
- d. Click Verify.

ForwardHealth
Get a verification email
ØUSER1
Send a verification email to g***I@gainwelltechnolo gies.com by clicking on "Send me an email".
Send me an email
Back to sign in

A Get a verification email box will be displayed.

Figure 19 Get A Verification Email Box

e. Click Send me an email.

ForwardHealth
Verify with your email
(8) USER1
We sent an email to g***1@gainwelltechnologies.co m. Click the verification link in your email to continue or enter the code below.
Enter a verification code instead
<u>Back to sign in</u>

A Verify with your email box will be displayed and an email will be sent.

Figure 20 Verify With Your Email Box

7. The email sent to the user's email address includes a **Reset Password** link (Option 1) and a verification code (Option 2).

Account password reset \bigcirc Okta <noreply@okta.com> To: User1 \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc</noreply@okta.com>	
CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.	
MO-WIMMIS - Okta Password Reset Requested	
Hi User1,	
A password reset request was made for your LTC IES RM CITR account. If you did not make this request, please contact your system administrator immediately.	
Click this link to reset the password for abcde77:	
Option 1 Reset Password This link expires in 10 minutes. Can't use the link? Enter a code instead: 636734	

Figure 21 Account Password Reset Email

- 8. The user can choose to either click the **Reset Password** link (Option 1) or enter the verification code from the email (Option 2) instead.
 - Clicking the **Reset Password** link from the email will display a verification code box.

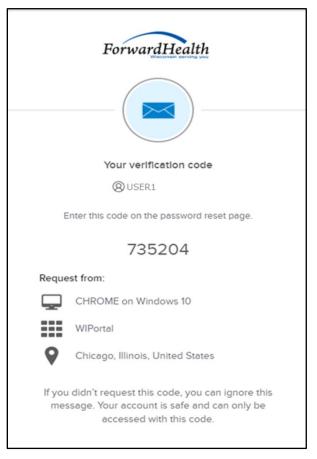


Figure 22 Verification Code Box

9. Copy the verification code from the verification code box or from the account password reset email, return to the verify with your email box, and click **Enter a verification code instead**.

10. Enter the code from the verification code box or the code from the account password reset email and click **Verify**.

ForwardHealth
Verify with your email
(8) USERI
We sent an email to g***I@wisconsin.gov. Click the verification link in your email to continue or enter the code below.
Enter Code
Verify
Back to sign in

Figure 23 Verify With Your Email Box

The Reset your Okta password box will be displayed	The Reset your	Okta	password	box will	be display	yed.
--	----------------	------	----------	----------	------------	------

ForwardHealth	
Reset your Okta password	
 Password requirements: At least 9 characters A lowercase letter An uppercase letter A number No parts of your username Password can't be the same as your last 24 passwords 	
New password	
Re-enter password	,
0	
Sign me out of all other devices.	
Reset Password	
Back to sign in	

Figure 24 Reset Your Okta Password Box

- **11.** Enter a new password (twice for confirmation).
- **12.** Click **Reset Password**. The password will be changed, and the user will be logged in to the CITR application.

3.2 Unlocking an Account

- **1.** Access the CITR application.
- 2. Click Sign in with Okta.

A sign In box will be displayed.

	ForwardHea	lth
	Sign In	
Usern	ame	
1		
C Ke	ep me signed in	
	Next	
Unloc	account?	
Help		
Loggir	g in for the first time?	

Figure 25 Sign In Box

3. Click Unlock account?

An Unlock account box will be displayed.

	ForwardHealth	
	Unlock account?	
Usernan	ie]
	Email	Select
C	Phone	Select
Back to s	l <u>gn In</u>	

Figure 26 Unlock Account Box

- **4.** Enter the user's username.
- 5. Click **Select** to receive a verification via email or phone.

- If the user clicks **Selec**t for email:
 - a. A Get a verification email box will be displayed.

Get a verification email © USER1 Send a verification email by clicking on "Send me an email".
OUSER1 Send a verification email by clicking on "Send me
Send a verification email by clicking on "Send me
difendit.
Send me an email
Verify with something else
Back to sign in

Figure 27 Get A Verification Email

b. Click **Send me an email**. Note: The user also has the option to select **Verify with something else**, which will take them back to the Unlock account box, or **Back to sign in**, which will take them back to the sign in page.

ForwardHealth				
Verify with your email				
(8) USER1				
We sent you a verification email. Click the verification link in your email to continue or enter the code below. Enter a verification code instead				
Verify with something else				
Back to sign in				

A verify with your email box will be displayed and an email will be sent.

Figure 28 Verify With Your Email Box

c. Proceed to <u>Step 6</u>.

• If the user clicks **Select** for phone:

a. A verify with your phone box will be displayed.

ForwardHealth	
Verify with your phone	
(B) USER1	
Send a code via SMS to your phone. Carrier messaging charges may apply	
Receive a code via SMS	
Receive a voice call instead	
Verify with something else	
Back to sign in	

Figure 29 Verify With Your Phone Box

b. Click **Receive a code via SMS** (text) or **Receive a voice call instead**. Note: The user also has the option to select **Verify with something else**, which will take them back to the Unlock account box, or **Back to sign in**, which will take them back to the sign in page.

ForwardHealth	
Verify with your phone	
(B) USER1	
A code was sent to your phone . Enter the code below to verify. Carrier messaging charges may apply Enter Code	
1	
Verify	
<u>Verify with something else</u> <u>Back to sign in</u>	

A Verify with your phone box will be displayed.

Figure 30 Verify With Your Phone Box

- c. Enter the code that was sent.
- d. Click Verify.

ForwardHealth
Get a verification email
ØUSER1
Send a verification email to g***1@gainwelltechnolo gies.com by clicking on "Send me an email".
Send me an email
Back to sign in

A Get a verification email box will be displayed.

Figure 31 Get a Verification Email Box

e. Click Send me an email.

ForwardHealth
Verify with your email
(8) USER1
We sent an email to g***1@gainwelltechnologies.co m. Click the verification link in your email to continue or enter the code below.
Enter a verification code instead
Back to sign in

A Verify with your email box will be displayed and an email will be sent.

Figure 32 Verify With Your Email Box

6. The email sent to the user's email address includes an Unlock Account link (Option 1) and a verification code (Option 2).

Unlock Account						
Okta <noreply@okta.com></noreply@okta.com>	٢		« Reply All	\rightarrow Forward	ij	
To User1				Tue 2/6/	2024 11	:28 AM
(i) If there are problems with how this message is displayed, click I Click here to download pictures. To help protect your privacy, C				f some pictures in	this me	ssage.
MO-WIMMIS - Okta Account Unloc	k Re	quested				
Hi User1,						
n oser,						
An account unlock request was made, by you, for you make this request, please contact your system admir						
make this request, please contact your system autim	iistiatt	n inneulater	y.			
Click this link to unlock the account for your usernam	ie, USE	R1:				
		Option 1	£			
		Option 1				
Unlock Account				_		
This link oursises in 10 m	J		Option	2		
This link expires in 10 m						
Can't use the link? Enter a code	nstead	: 833119				

Figure 33 One-Time Verification Code Email

7. The user can choose to either click the **Unlock Account** link (Option 1) or enter the verification code from the email (Option 2) instead.

• Clicking the Unlock Account link from the email will display a verification code box.

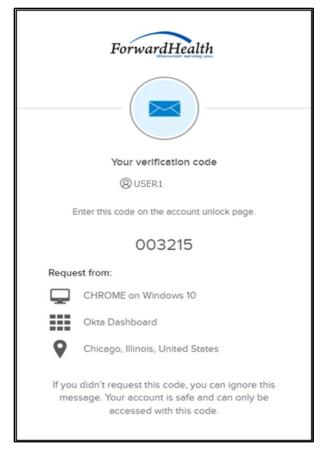


Figure 34 Verification Code Box

- 8. Copy the verification code from the verification code box or from the unlock account email, return to the verify with your email box, and click **Enter a verification code instead**.
- **9.** Enter the code from the verification code box or from the unlock account email and click **Verify**.

A Verify with your password box will be displayed with a message stating the account has been successfully unlocked.

Verify	/ with your password
æ	USER1
	fully unlocked! Verify your accoun curity method to continue.
	0
	Verify
Forgot password?	

Figure 35 Verification Code Box

10. Click Back to sign in to log in.

4 Accessing Children's Incidents

The CITR system allows you to create an incident report that contains data concerning the incident, including attached electronic documents.

1. Access the CITR application at https://ltcareies.forwardhealth.wi.gov/citr.

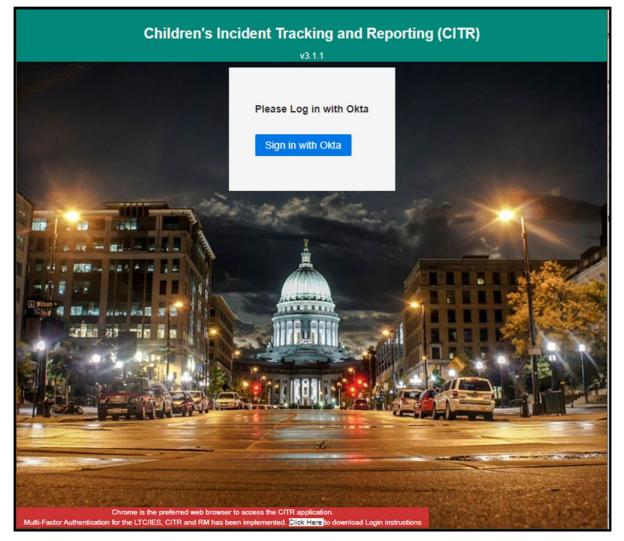


Figure 36 Children's Incident Tracking and Reporting (CITR) Sign in Page

2. Click Sign in with Okta.

A Sign In box will be displayed.

	ForwardHealth	
	Sign In	
Use	name	
]
- I	Keep me signed in	
	Next	
Unlo	ick account?	
Help	1	
Logg	ing in for the first time?	

Figure 37 Sign-In Box

- **3.** Enter the user's username.
- 4. Click Next.

ForwardHealt	<u>th</u>
Verify with your pass © USER1 Password	sword
•••••	0
Verify	
Forgot password? Back to sign in	

A Verify with your password box will be displayed.

Figure 38 Verify With Your Password Box

- 5. Enter the user's password. Note: If the user's password expires when setting up MFA, a change password box will be displayed, and the user will be prompted to enter and re-enter their new password.
- 6. Click Verify.

A Get a verification email box will be displayed.

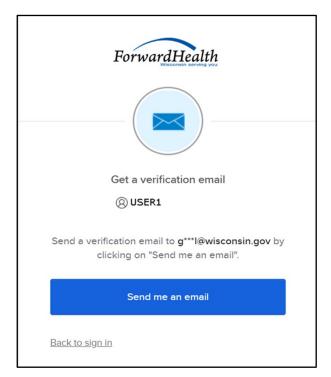


Figure 39 Get a Verification Email Box

7. Click Send me an email.

A box will be displayed indicating the email has been sent with a link to enter the code from the email.

ForwardHealth
Verify with your email
(Q) USER1
We sent an email to g***I@wisconsin.gov. Click the verification link in your email to continue or enter the code below.
Enter a verification code instead
Back to sign in

Figure 40 Verify With Your Email Box

8. The email with the verification code sent to the user's email address also includes a Sign In link.

One-time verification code Okta <noreply@okta.com> To: User1</noreply@okta.com>	(2) ← (5) → (10:41 AM
CAUTION: This email originated from outside of the organization. attachments unless you recognize the sender and know the conte	
Hi User1,	
You have requested an email link to sign in to LTC IES RM CITR. To the button below or enter the provided code. If you did not reque contact an administrator at <u>VDXCLTCIESHelp@wisconsin.gov</u> .	
Sign In This link expires in 10 minutes. Can't use the link? Enter a code instead: 7257	761

Figure 41 One-Time Verification Code Email

9. The user can choose to either click the Sign In link or enter the verification code from the email instead.

• Clicking the Sign In link from the email will display a verification code box.

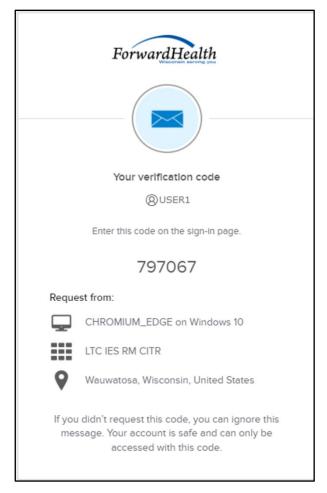


Figure 42 Verification Code Box

10. Copy the verification code from the verification code box or from the one-time verification code email, return to the verify with your email box, and click **Enter a verification code instead**.

11. Enter the code from the verification code box or the code from the one-time verification code email and click **Verify**.

ForwardHealth
Verify with your email
(8) USERI
We sent an email to g***I@wisconsin.gov. Click the verification link in your email to continue or enter the code below.
Enter Code
Verify
Back to sign in

Figure 43 Verify With Your Email Box

The Incidents Dashboard will be displayed. This panel allows the user to view all the incidents that have been created for their agency. Users can search for any field displayed on this panel. By selecting the incident, the user can view and edit the data entered.

ogout Dashboard	Create a New Incident	Legacy Incident Data	Reports										
CARATURATU	Citale a New Incoden	cegacy modern tana	regions		N	ly Inci	dente						
Draft		In Progress		Per	nding			tate Review	,		Certified		Unlocked
2		0			0			0			0		0
oldents Agency Par	ticipants												
	First Name						Particip	ant ID					
	Last Name						Date of	Birth	mm-dd-уууу	m			
	Worker First Name						Worker La	ist Name					
											Clear Sear	ch	
iny: Incidents		All Inciden	to.										
er(s):	IN PR	OGRESS		NDING		STATE R	EVIEW	CERT	IFIED			OCKED	
Apply Fillers													
w 10 v entries	-												Search
	DHS Revie	wed * o	Participant 0	Participant =	Waiver Agency 0 Name	Status	Greated 0 Date	Last Updated 0 Date	Assigned Worker	Entry 0 Worker	÷ History	¢ Inactive	
		20211268	Test Test	2222222222	78000001 - CITR Test 1	Draft	12/14/2021	12/14/2021			History	Inactive	
		20211270	Test Test	22222222222	78000001 CITR Test 1	Draft	12/14/2021	12/14/2021			History	Inactive	

Figure 44 Incidents Dashboard

At the top of the panel are the number of incidents that are being drafted, currently in progress, pending, being reviewed by the State, certified, or unlocked.

12. To view incidents, click the **My Incidents** or **All Incidents** radio button listed under the Display heading of the panel. Information about each incident created for the agency will be displayed across 12 columns at the bottom of the page. The My Incidents radio button

displays specific incidents assigned to the agency worker. The All Incidents radio button displays all the incidents for the agency.

The user can select the number of entries they want to view on each page by selecting the **Show entries** drop-down menu. The user can choose to search 10, 25, 50, or 100 entries per page.

Note: The State user has access to every incident created in the system, while the agency worker can access only reports for their agency.

						Childrei	n's Inciden	t Trackin	g and Rep	orting (CITF	र)					
logout	Dashboard	Create a New I	ncident	gacy Incident Data	Reports]										
								y Incid								
	Draft		In	Progress			ding		St	ate Review			Certified		Unlocked	
	2			0		(C			0			0		0	
Incidents Search:	Agency Parti	cipants														
		First Name							Participa	int ID						
		Last Name							Date of	Birth	mm-dd-yyyy	m				
		Worker First N	ame						Worker La	st Name						
													Clear Sean	ch		
Display:																
My Incident Filter(s):				 All Incidents 												
	DRAFT		IN PROGRES	9	M PER	IDING		STATE R	EVIEW	CERTI	FIED			DCKED		
	Apply Filters															
Show 10	✓ entries														Search	
			DHS Reviewed * by	the incident ID	Participant 0 Name	Participant 0	Waiver Agency 0 Name	÷ Status	Created © Date	Last Updated © Date	Assigned 0 Worker	Entry 0 Worker	÷ History	÷ Inactive		
				20211268	Test Test	2222222222	78000001 - CITR Test 1	Draft	12/14/2021	12/14/2021			History	Inactive		
				20211270	rest rest	2222222222	78000001 CITR Test 1	Draft	12/14/2021	12/14/2021			History	Inactive		
Showing 1 to	2 of 2 entries														Previous 1	Next
_ <																>

Figure 45 Incidents Dashboard

The panel will include the following information related to the incident:

- The *DHS Reviewed By* column: Used by DHS staff to indicate that an incident report has been reviewed.
- The *Incident ID* column displays the ID number of the incident. The user can click the <u>incident ID</u> to bring up all the information related to an incident.
- The *Participant Name* column identifies the participant.
- The *Participant ID* column displays the ID number of the participant.
- The *Waiver Agency Name* column displays the associated waiver agency.
- The *Status* column displays the status of the incident.
- The *Created Date* column displays the date the incident was created.
- The *Last Updated Date* column displays the last date the incident was updated.
- The Assigned Worker column displays the assigned agency worker responsible for the incident report.

- The Entry Worker column displays the individual who entered the information.
- The *History* column displays the participant's incident history. The user can click <u>History</u> to bring up the participant's incident history including all incidents and attachments.
- The *Inactive* column allows the user to inactivate the incident. The user can click the Inactive box to bring up a dialog box, which gives them the option to inactivate the incident.

Note: The user can search for any of the fields displayed on the panel by populating the **Search** box.

4.1 Search Function

The user can search for a participant incident by entering any of the following: the participant's first name, last name, ID, and/or date of birth and the agency worker's first and/or last name. The user has the option to filter incidents by choosing either the My Incidents or All Incidents radio button listed under the Display heading of the panel. Only incidents for those specific groups will be listed.

- 1. To search for a participant incident, enter any of the following under the "Search" section of the panel:
 - The participant's first name in the *First Name* field.
 - The participant's last name in the *Last Name* field.
 - The participant's ID in the *Participant ID* field.
 - The participant's date of birth in the *Date of Birth* field using the mm-dd-yyyy format or use the calendar by clicking the calendar icon that appears to the right of the date format.
 - The worker's first name in the Worker First Name field.
 - The worker's last name in the Worker Last Name field.
- 2. Click Search, and the participant's incident information will be displayed across 12 columns at the bottom of the screen.

4.2 Filter for Incidents

The user can filter for the status of incident reports by choosing from the following statuses listed at the top of the panel:

- Draft—This status indicates the incident report is still being drafted.
- In Progress—This status indicates initial notification to DHS has been made but the waiver agency has not completed the report. The status is changed from "Draft" to "In Progress" when the user selects "Save & Send to DHS" on the <u>Finalize Initial Save panel</u>.

- Pending—If any one of the following substantiation questions from the <u>Final Incident Details</u> <u>panel</u> are answered as "Pending," the incident status will indicate the report is pending at the final submission to DHS. When all the questions are answered with a "Yes" or "No" response, the incident will have a status of either "Certified" or "State Review" when it is submitted to DHS:
 - a. Did this incident result in a substantiated finding of abuse by a government agency?
 - b. Did this incident result in a substantiated finding of neglect by a government agency?
 - c. Did this incident result in a substantiated finding of exploitation by a government agency?

Note: When an incident has been in the status of pending for 60 days, an email will be sent warning that the user is approaching the 90-day limit and reminding them to update the incident report. Another email will be sent when an incident has been in a status of pending for 90 days and they will be reminded to update the incident report.

- State Review—This status indicates the incident report has been completed by the waiver agency and DHS is reviewing.
- Certified—This status indicates that DHS has completed review, and the incident report is complete.
- Unlocked—This status indicates the State administrator has unlocked the incident report to allow the user to edit the incident after it has been sent to DHS. This is usually done when DHS requires additional information.
- **1.** To filter for the status of an incident, check the box for the appropriate filter(s).
- 2. Filters will be applied when selected or when the user clicks **Apply Filters**. All incidents with the status indicated will be displayed.

4.3 Participant Incident History

This panel allows a user to view the participant's incident history. The incident history can also be accessed via the <u>Agency Participants dashboard</u>.

1. On the Incidents dashboard, click **History** in the History column for an agency participant. The Participant Incident History panel will be displayed.

Participant ID		First Name		Middle Inital Name	
1212121212					
Last Name		Suffix		DATE OF BIRTH	
IDENTS & ASSOCIATED AT	TACHMENTS				
CIDENTS & ASSOCIATED AT	TACHMENTS				
	TACHMENTS				Search:
acy History	TACHMENTS	Incident Type	Agency	Incident Status	Search: Date Occurred

Figure 46 Participant Incident History Panel

The panel may include the following information related to the participant:

- The *Participant ID* field displays the participant's ID number.
- The *First Name* field displays the participant's first name.
- The *Middle Initial Name* field displays the participant's middle initial.
- The *Last Name* field displays the participant's last name.
- The *Suffix* field displays the participant's suffix, if applicable
- The *Date of Birth* field displays the participant's date of birth.

The "Incidents & Associated Attachments" section may include the following information:

- The Incident ID column displays the ID number of the incident.
- The *Incident Type* column displays the type of incident.
- The *Agency* column identifies the responsible agency.
- The *Incident Status* column displays the status of the incident.
- The *Date Occurred* column displays the date the incident occurred.

Note: Users can click **Attachments** in the first column under the "Incidents & Associated Attachments" section to view a list of associated attachments related to the incident. Information may include the attachment name, URL, type, and uploaded date.

Note: Users can search for a participant's incident history by entering an incident ID in the **Search** box.

4.4 Inactivating an Incident

This panel allows a user to inactivate an incident. Only incidents that are in a status of "Draft" or "In Progress" can be inactivated.

1. On the Incidents dashboard, click **Inactive** in the Inactive column for an agency participant. A dialog box will appear to confirm that the user wants to inactivate the incident.



Figure 47 Dialog Box

2. Click **SUBMIT**. A dialog box will appear to indicate the incident has been set inactive.



Figure 48 Dialog Box

3. Click OK. The Incidents dashboard will be displayed.

4.5 Agency Participants Dashboard

This panel allows the user to view all agency participants and search/filter through the data. The user can create a new incident for one of the participants. When the user clicks the Create Incident button associated with the participant, the participant data is prefilled on the first form.

1. On the Incidents dashboard, click **Agency Participants**. The Agency Participants dashboard will be displayed.

			Children's Incident Trac	king and Reporting (CITR)		
logout	Dashboard	reate a New Incident Legacy Inci	Ident Data Reports			
			Agency F	Participants		
I	Draft	In Progress	Pending	State Review	Certified	Unlocked
	10	0	0	1	0	0
Incidents Search:	Agency Participar	its				
	First N	lame		Participant ID		
	Last N	lame]	Date of Birth	ууу 🛗	
					Search	
<						>

Figure 49 Agency Participants Dashboard

At the top of the panel are the number of incidents that are being drafted, currently in progress, pending, being reviewed by the State, certified, or unlocked.

4.5.1 Search Function

A user can search for a participant by entering any of the following: the participant's first name, last name, ID, and/or date of birth.

- 1. To search for a participant, enter any of the following under the "Search" section of the panel:
 - The participant's first name in the *First Name* field.
 - The participant's last name in the *Last Name* field.
 - The participant's ID in the *Participant ID* field.
 - The participant's date of birth in the *Date of Birth* field using the mm-dd-yyyy format or use the calendar by clicking the calendar icon that appears to the right of the date format.
- 2. Click Search. Information about each participant will be displayed across eight columns at the bottom of the screen.

Children's Incident Tracking and Reporting (CITR)											
logout Dashbo	oard Create	a New Incident	Legacy Inc	cident Data	Reports						
					Agency	Pa	articipants				
Draft		In Progres	ss	P	ending		State Review	v Cer	tified	Unloc	ked
16	16 0 0 1 0				0	0					
Incidents Agence Search:	First Name						Participant ID Date of Birth	111111 mm-dd-yyyy S	arch		
Show 10 ∨ entries									Searc	h:	
Participant ID	 Participant 	t Name 🍦 🛛	ate of Birth	¢ Ci	reate Incident	÷	View History	Last Incident Date 🍦	Enrollment Period	Status	∀
111111111	Tester M Te	sted 01	/25/2004	C	Create Incident		View	02/01/2020	03/06/2018-Current	Current	
111111115	Testmaxwell	Testcassy 01	/28/2004	C	create Incident		View	02/01/2020	10/01/2017-Current	Current	
Showing 1 to 2 of 2 entr	ries									Previous	1 Next

Figure 50 Agency Participant Search

The panel may include the following information related to the participant:

- The *Participant ID* column displays the identification number of the participant.
- The Participant Name column identifies the participant.
- The *Date of Birth* column displays the participant's date of birth.
- The *Create Incident* column allows the user to create an incident by clicking the <u>Create</u> <u>Incident</u> box.
- The *View History* column allows the user to view the prior history of the participant by clicking <u>View</u>.
- The Last Incident Date column displays the last reported incident.
- The *Enrollment Period* column displays the dates the participant is enrolled.
- The *Status* column displays the status of the participant.

Note: The user can search for any of the fields displayed on the panel by populating the **Search** box.

5 Creating an Incident for a Participant Enrolled in CLTS

This function allows the user to create an incident for a participant that is currently enrolled in CLTS.

- 1. On the Agency Participants dashboard, search for an agency participant using the <u>search</u> <u>function</u>. Input any of the following: the participant's first name, last name, ID, and/or date of birth using the mm-dd-yyyy format or use the calendar by clicking the calendar icon that appears to the right of the date format.
- 2. Click Search. Information about the participant will be displayed across eight columns at the bottom of the screen.
- 3. Click Create Incident in the Create Incident column for the agency participant.

Incidents		articipants			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				~~~~		~~~~		~~~~		,	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Search:	Fir	st Name tester						Participa	ant ID [1111111						
		st Name tested						Date of			Ê					
											Sea	arch				
Show 10 🗸	entries						/	•				Sear	ch:			
Participant	ID 🔺	Participant	Name 🔶	Date of Bir	rth 🔶	Create Incident		View History	¢	Last Incident Date	¢	Enrollment Period	¢	Status		¢
1111111111		Tester M Tes	sted	01/25/2004		Create Incident		View		12/05/2019	C	13/06/2018-Current		Current		

Figure 51 Figure 1 Create Incident

4. A dialog box will appear to confirm the user's selection.



Figure 52 Dialog Box

5. Click **Yes!** The Participant Information and Incident Notification panel will be displayed under the Notification stage.

	Children's Incident Tracking and Report	ting (CITR)
logout Dashboard Create a New Incident Legacy Incident Data	Reports	
Incident ID	Participant ID	Participant Name
оОООВ	→ AGENCY → STATE REV − 0 − − 0 − − 0	
PARTICIPANT INFORMATION	* Indicates a required field	
Participant ID • Search Participant ID is required to create an incident	ls this a Vulnerable Child? • ○ Yes ○ No	
First Name •	Vulnerable Child is required Middle Initial/Name	Last Name •
Suffix × •	Gender • O Male O Female Gender is required	Date of Birth • mm-dd-yyyy Date of birth is required
Previous First Name	Previous Middle Initial/Name	Previous Last Name
Previous Suffix × *		
Target Group at the time of incident" Target Group is required		
Program* Program is required		
INCIDENT NOTIFICATION Date Incident Occurred •	In what county did the incide	
mm-dd-yyyy	County is required	× *
What agency is responsible for this Participant? • Agency is required Date the waiver agency was notified of incident •	Who reported the incident to	o the waiver agency? *
mm-dd-yyyy	Who reported the incident is required	× •
Download Incident		Save & Continue

Figure 53 Participant Information/Incident Notification Panel

Note: A progress header is displayed at the top of the panel. The paper icon represents the point at which initial notification to DHS has been made. The lock icon represents the point at which the final report has been submitted and can no longer be updated.

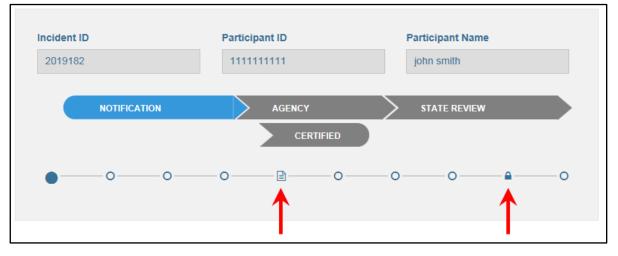


Figure 54 Figure 2 Progress Header

6. In the "Participant Information" section, enter a Participant ID in the *Participant ID* field. All required fields are marked with a red asterisk.

Note: Users are required to perform a search on the participant's ID before proceeding to the entire incident. If the search finds the participant in the database, the name, gender, and date of birth fields will be prefilled. If the participant's ID is not found in the database, the user can manually enter the required information.

- 7. Select Yes or No to the question regarding whether this is a vulnerable child.
- 8. Enter the participant's name in the First Name, Middle Initial/Name, and Last Name fields.
- 9. Enter the participant's suffix in the *Suffix* field using the drop-down menu if applicable.
- 10. Select Male or Female button in the Gender field.
- **11.** Enter the participant's date of birth in the *Date of Birth* field using the mm-dd-yyyy format or use the calendar by clicking the calendar icon that appears to the right of the date format.
- **12.** Enter the participant's previous name information in the previous name fields if applicable.
- **13.** Enter the participant's previous suffix in the *Previous Suffix* field using the drop-down menu if applicable.
- **14.** Select the target group in the *Target Group at the time of incident* field. Target groups are identified as follows:
 - I/DD: Intellectual/Developmental Disability
 - SED: Severe Emotional Disturbance

• PD: Physical Disability

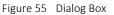
15. Select the program in the *Program* field. Programs are identified as follows:

- CLTS: Children's Long-Term Support Waiver Program
- CCOP: Children's Community Options Program
- **16.** In the "Incident Notification" section, enter the date of the incident in the *Date Incident Occurred* field using the mm-dd-yyyy format or using the calendar by clicking the calendar icon that appears to the right of the date format. This date must be the same as or after the birth date of the participant and cannot be a future date.
- **17.** Select the county in which the incident occurred using the drop-down menu.
- **18**. Select the agency that is responsible for the participant using the drop-down menu.
- **19.** Enter the date the waiver agency was notified of the incident using the mm-dd-yyyy format or using the calendar by clicking the calendar icon that appears to the right of the date format. This date must be the same as or after the incident date and cannot be a future date.
- **20.** Answer the question about who reported the incident to the waiver agency using the dropdown menu.

Note: You can click **Download Incident** on the bottom of the panel to create a PDF of the entire incident. This option is available after the initial save of this screen, which will create the incident.

21. Click Save & Continue. A dialog box will appear to confirm you want to leave the page.





22. Click Yes!

Note: Each time this is clicked, the data the user has entered is saved in the database.

23. The Participant Contact Information panel will be displayed. The participant's incident ID, ID number, and name information will be prefilled at the top of the panel.

Incident ID	Participant ID	Participant Name
2020670	111111111	TESTER M TESTED
NOTIFICA		STATE REVIEW CERTIFIED
00	0 0 0 0 0	O
PARTICIPANT CONTACT INFORM	MATION	* Indicates a required field
Primary Phone Number *	Current Living Arrangement*	Participant is legally responsible for self?
XXXXXXXXX	'Select'	•
Phone Number is required	Living Arrangement is required	
Concerned Entity 1		
(Parent/Guardian/Representative)		
First Name	Middle Initial/Name	Last Name
Suffix	Phone Number XXXXXXXXXX	
Please Select	▼ XXXXXXXXXX	
Concerned Entity 2		
(Parent/Guardian/Representative)		
First Name	Middle Initial/Name	Last Name
Suffix	Phone Number	
Please Select	▼ XXXXXXXXXX	
Previous	Download Incic	dent Save & Continue

Figure 56 Participant Contact Information Panel

- 24. Enter the primary phone number for the child or the child's parent/legal guardian in the *Primary Phone Number* field.
- **25.** Select the current living arrangement from the *Current Living Arrangement* field using the drop-down menu.
- **26.** Check the box if the participant is legally responsible for themselves.
- 27. Under Concerned Entity 1, enter the parent/guardian/representative's name in the *First Name, Middle Initial/Name,* and *Last Name* fields.
- **28.** Enter a suffix in the *Suffix* field if applicable.
- **29.** Enter the parent/guardian/representative's phone number in the *Phone Number* field.
- **30.** If applicable, under Concerned Entity 2, enter the parent/guardian/representative's name in the *First Name, Middle Initial/Name,* and *Last Name* fields.
- **31.** Enter a suffix in the *Suffix* field using the drop-down menu if applicable.
- **32.** Enter the parent/guardian/representative's phone number in the *Phone Number* field.
- **33.** Click **Save & Continue**. A dialog box will be displayed to confirm the user wants to leave the page.



Figure 57 Dialog Box

34. Click **Yes!** The Incident Type, Provider Involvement, Incident Description, and Referral panel will be displayed.

INCIDENT TYPE Up to three incidents types can be selected	* Indicates a required field
Type 1	
Incident Type •	Incident Type Detail •
01 - Abuse X -	03 - Abuse - Physical 👻
	Add Incident Type
PROVIDER INVOLVEMENT	
Was a provider involved with the incident ?	
O Yes, a provider was involved	Provider Involvement *
No, a provider was not involved	×
	Name of Provider Agency +
	Hame or Forneer regimes
INCIDENT DESCRIPTION	
Where did the incident occur?*	
08 - Foster Home	X *
Incident Description *	
Test	
Maximum 3000 characters Actions taken to remediate the situation? *	
Test	
Naximum 3000 characters	
INCIDENT REFERRAL	
Referred Date 1	Referred To 1 *
01-04-2022 * 🗎	02 - Advocacy organization × •
Referred Date 2	Referred To 2
mm-dd-yyyy 🛍	· ·
Referred Date 3	Referred To 3
mm-dd-yyyy 🛍	*
Previous	Download Incident Save & Continue

Figure 58 Incident Type, Provider Involvement, Incident Description, and Incident Referral Panel

35. Under the "Incident Type, Type 1" section, select the incident type in the Incident Type field using the drop-down menu. Menu options for this field are available in <u>Appendix D: Data</u> <u>Fields and Menu Options</u>.

Note: Selecting the "Other" option from a drop-down menu will bring up a text box description field.

36. Select the incident type detail in the *Incident Type Detail* field using the drop-down menu. Menu options for this field are available in Appendix D: Data Fields and Menu Options.

Note: Users can click **Add Incident Type** to add incident types. Up to three incident types can be added. Also, if three incident types are listed and the second incident type is removed, the third incident type would also be removed and would need to be re-entered.

- **37.** Under the "Provider Involvement" section, answer the question asking if the provider was involved with the incident by selecting **Yes, a provider was involved** or **No, a provider was not involved**. If a provider was involved, use the drop-down menu under the *Provider Involvement* field and identify the provider's agency under *Name of Provider Agency* field.
- **38.** Under the "Incident Description" section, enter where the incident occurred in the *Where did the incident occur?* field using the drop-down menu. Menu options for this field are available in <u>Appendix D: Data Fields and Menu Options</u>.
- **39.** Enter a narrative about the incident in the *Incident Description* field. Text is limited to 3,000 characters.

- **40.** Describe what actions were taken to remediate the situation in the *Actions taken to remediate the situation?* field. Text is limited to 3,000 characters.
- **41.** Under the "Incident Referral" section, enter the referred date in the *Referred Date 1* field using the mm-dd-yyyy format or use the calendar by clicking the calendar icon that appears to the right of the date format. This date must be equal to or after the incident date and cannot be a future date.
- **42.** Enter the referral in the *Referred To 1* field using the drop-down menu. Users can enter up to three referrals.
- **43.** Click **Save & Send to DHS**. A dialog box will appear to confirm the user wants to leave the page. The incident status changes to "in progress."

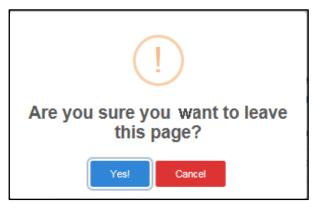


Figure 59 Dialog Box

44. Click Yes!

45. An incident notification email will be generated to State administrators and agency staff.

The incident notification email includes the following:

- a. Date the agency was notified
- b. Incident ID
- c. Participant ID

d. Submitter Org

	Wed 12/15/2021 9:10 AM
E	EncounterUAT_Notification@wimmis.org
0	[New Incident]Children Incidents Tracking and Reporting Application.
To O Schmierer	epublishie.com © sakuleitikie.com © Organizametrikienet; © Gelan, Hary-Witt; Charytitikie.com © janadeztitikie.com © jankhoitikie.com © jankhoitik
	This email originated from outside the organization. I links or open attachments unless you recognize the sender and know the content is safe.
Date the age	ency was notified: 12/02/2021
Incident ID:	
	D: 222222222 rg: 78000001 - CITR Test 1

Figure 60 Incident Notification Email

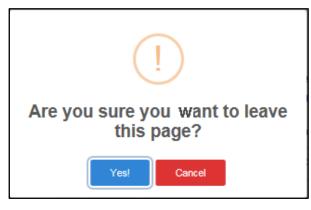
46. The Finalize Initial Save panel will be displayed. The fields under the "Data Entry Worker Credentials" section will be pre-filled based on the login information.

logout Dashboard Create a New Incident Legacy Incident Data	Reports	
Incident ID	Participant ID	Participant Name
20211268	2222222222	TEST TEST
NOTION	CATION AGENCY STATE REVIEW	CERTIFIED
· · · · · · · · · · · · · · · · · · ·	o o o	o o o o
FINALIZE INITIAL SAVE DATA ENTRY WORKER CREDENTIALS (ARE NOT EDITABLE)	* Indicates a required field	
First Name	Last Name	Email
Phone Number Ext		
AGENCY WORKER RESPONSIBLE FOR REPORT Are you the agency worker responsible for this report? If you are not, please select the v	Norker responsible below. The Fleid is required. O Yes I am responsible O No, someo respons	
		Agency Worker Responsible 'Select'
First Name	Last Name	Agency Worker Responsible is required Email
Phone Number Ext (XXX)-XXXX-XXXXX XXXXXX		
Previous Download Incident	DHS Reviewed	Save & Continue

Figure 61 Finalize Initial Save Panel

47. Under the "Agency Worker Responsible for Report" section, select **Yes I am responsible** or **No someone else is responsible** to the question regarding whether the user is the agency worker responsible for this report. If they are not responsible, select the worker who is responsible using the drop-down menu and enter their information in the *First Name*, *Last Name*, *Email*, *Phone Number*, and *Ext*. fields.

48. Click Save & Continue. A dialog box will appear to confirm the user wants to leave the page.





49. Click Yes!

50. The incident moves to the Agency stage and the Alleged Maltreater panel will be displayed.

ALLEGED MALTREATER Type 1	* Indicates a required field		
Is the alleged maltreater known? * O Yes, the alleged maltreater is known O No, the alleged maltreater is unknown O N/A-there is no alleged maltreater		ADD MALTREATER	
COURT ORDER INFORMATION			
Is the participant currently under a court order? •	Type of Court Order *		
⊖ Yes	Select		
No Participant under a court order is required			
PARENT/GUARDIAN NOTIFICATION			
Is the parent/guardian aware of this incident ? * O Yes O No Maxe hotert is regimed Is the parent/guardian the subject of the investigation ? * O Yes O No Investigation is regimed	Date parent/guardian was notified *		
Previous	Download Incident		Save & Continue

Figure 63 Alleged Maltreater Panel

51. Under the "Alleged Maltreater, Type 1" section, answer the question asking if the alleged maltreater is known by selecting Yes, the alleged maltreater is known; No, the alleged maltreater is unknown; or N/A-there is no alleged maltreater. If applicable, enter the alleged maltreater's relationship to the participant using the drop-down menu under the *Relationship to Participant* field and the type of involvement using the drop-down menu under the *Type of Involvement* field.

Note: The user can add an additional maltreater by clicking the **Add Maltreater** box on the far right of the page. Up to three maltreaters can be listed. Also, if three maltreaters are listed and the second maltreater is removed, the third maltreater would also be removed and would need to be re-entered.

- **52.** Under the "Court Order Information" section, answers the question asking if the participant is currently under a court order by selecting **Yes** or **No**. If yes, select the type of court order under the *Type of Court Order* field using the drop-down menu.
- **53.** Under the "Parent/Guardian Notification" section, answer the question asking if the parent/guardian is aware of this incident by selecting **Yes** or **No**. If yes, enter the date the parent/guardian was notified in the *Date parent/guardian was notified* field using the mm-dd-yyyy format or use the calendar by clicking the calendar icon that appears to the right of the date format. This date must be equal to or after the incident date and cannot be a future date.
- **54.** Answer the question asking if the parent/guardian is the subject of the investigation by selecting **Yes** or **No**.
 - Image: Cancel

Figure 64 Dialog Box

55. Click Save & Continue. A dialog box will appear to confirm the user wants to leave the page.

56. Click **Yes!** The Final Incident Details panel will be displayed.

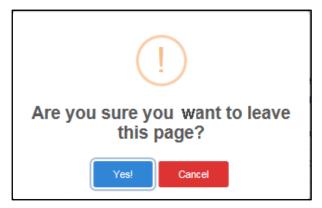
F			
FINAL INCIDENT DETAILS			
Was the Participant or their legal representative informed of the county waiver agency's review and response? •			
⊖ Yes			
○ No			
This field is required			
Select all persons/agencies contacted by the county waiver agency	Note any person/entity not notified and why		
	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 \cdot			
Type In more explanation about the incident			
Maximum 3000 characters This field is required			
Did this incident result in a substantiated finding of abuse by a government agency?	Date of substantiation (Required if answered "Yes")		
government agency : -	mm-dd-yyyy		
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? •	Date of substantiation (Required if answered "Yes")		
X -	mm-dd-yyyy		
Substantiating Agencies (Required if answered "Yes", up to three can be submitted)			
Substantiating Agencies (requires in answered Tes ; op to unee can be submitted)			
Did this incident result in a substantiated finding of exploitation by a	Date of substantiation (Required if answered "Yes")		
government agency? *	mm-dd-yyyy		
X 🔻			
Substantiating Agencies (Required if answered "Yes", up to three can be submitted)			
Outcome '			
Please Select			
Please Select Outcomes is required		*	
Outcome Determination Date			
mm-dd-yyyy			
Incident outcome date is required			
Remediation Action 1 *	Remediation Action 2	Remediation Action 3	
Please Select	Please Select 👻	Please Select	*
Remediation Action 1 is required			
Preventative Strategy 1 •	Preventative Strategy 2	Preventative Strategy 3	
Please Select -	Please Select 👻	Please Select	Ψ.
Preventative Strategy 1 is required			
Previous	Download Incident		Save & Continue
1			

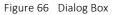
Figure 65 Final Incident Details Panel

- **57.** Answer the question asking if the participant or their legal representative were informed of the county waiver agency's (CWA's) review and response by selecting **Yes** or **No**.
- **58.** Provide information in the following fields:
 - Select all persons/agencies contacted by the CWA using the drop-down menu.
 - Note any person/entity not notified and why. Text is limited to 3,000 characters.
 - Provide details to describe the actions and changes implemented to ensure immediate and ongoing health and safety. Text is limited to 3,000 characters.
- **59.** Answer the question asking if the incident resulted in a substantiated finding of abuse by a government agency using the drop-down menu. If yes, enter the date of substantiation in the *Date of substantiation (Required if answered "Yes")* field using the mm-dd-yyyy format or use the calendar by clicking the calendar icon that appears to the right of the date format. This date must be equal to or after the incident date and cannot be a future date. If yes, enter the substantiating agencies in the *Substantiating Agencies (Required if answered "Yes", up to three can be submitted)* field.

- **60.** Answer the question asking if the incident resulted in a substantiated finding of neglect by a government agency using the drop-down menu. If yes, enter the date of substantiation in the *Date of substantiation (Required if answered "Yes")* field using the mm-dd-yyyy format or use the calendar by clicking the calendar icon that appears to the right of the date format. This date must be equal to or after the incident date and cannot be a future date. If yes, enter the substantiating agencies in the *Substantiating Agencies (Required if answered "Yes", up to three can be submitted)* field.
- **61.** Answer the question asking if the incident resulted in a substantiated finding of exploitation by a government agency using the drop-down menu. If yes, enter the date of substantiation in the *Date of substantiation (Required if answered "Yes")* field using the mm-dd-yyyy format or use the calendar by clicking the calendar icon that appears to the right of the date format. This date must be equal to or after the incident date and cannot be a future date. If yes, enter the substantiating agencies in *the Substantiating Agencies (Required if answered "Yes", up to three can be submitted)* field.
- **62.** If pending for sections 59 through 61, the page can be saved without selecting the outcome code.
- **63.** Enter the outcome in the *Outcome* field using the drop-down menu. Menu options for this field are available in <u>Appendix D: Data Fields and Menu Options</u>. Note: Outcome options should reflect the result of a Child Protective Services (CPS) investigation.
- **64.** Enter the outcome determination date in the *Outcome Determination Date* field using the mm-dd-yyyy format or use the calendar by clicking the calendar icon that appears to the right of the date format. This date must be equal to or after the incident date and cannot be a future date.
- 65. Enter the remediation action in the *Remediation Action 1* field using the drop-down menu. You can enter up to three remediation actions. Menu options for this field are available in <u>Appendix D: Data Fields and Menu Options</u>. Note: A remediation and preventative strategy routinely reflects the results of the CLTS program actions. It may sometimes reflect the results of the CPS program actions.
- **66.** Enter the preventative strategy in the *Preventative Strategy 1* field using the drop-down menu. You can enter up to three preventative strategies. Menu options for this field are available in <u>Appendix D: Data Fields and Menu Options</u>. Note: A remediation and preventative strategy routinely reflects the results of the CLTS program actions. It may sometimes reflect the results of the CPS program actions.

67. Click Save & Continue. A dialog box will appear to confirm the user wants to leave the page.





68. Click Yes! The Upload Files and Attached Files panel will be displayed.

Incident ID				Participant ID					Participant	Name			
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Figure 67 Figure 3 Upload Files and Attached Files Panel

- **69.** Under the "Upload File(s)" section, click **Attach Files** to attach any additional documents such as a court order, conviction, or provider report. The following file extensions that are allowed for uploading are: .pdf, .doc, .docx, .xls, .xlsx, .csv, .txt, .rft, .zip, .jpg, .jpeg, .png, or .gif.
- **70.** Identify the document type using the Document Type drop-down menu.

71. Click **Upload**. A dialog box will briefly appear and indicate if the document was successfully loaded.

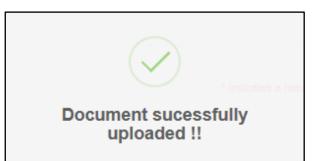


Figure 68 Figure 4 Dialog Box

72. The uploaded file will appear in the "Attached Files" section that displays six columns.

- The *Download* column allows the user to download the file by clicking **Download**.
- The *Document Number* column displays the document number assigned for the file.
- The *File Name* column displays the file name of the uploaded file.
- The Upload Date column displays the date the file was uploaded.
- The *Document Type* column displays the document type (for example, court order, provider report).
- The Delete column allows the user to delete the file by clicking **Delete**.

73. When all files have been uploaded, the following options may be available:

• Save and Notify DHS—This option will lock the incident for editing and an email will be generated to State and agency staff stating the incident is ready for review. Once DHS completes its review, the agency will receive an email notification.

Mon 1/31/2022 9:48 AM EncounterUAT_Notification@wimmis.org [Notification to State]Children Incidents Tracking and Reporting Application.
This email originated from outside the organization. ck links or open attachments unless you recognize the sender and know the content is safe.
: 20211268 10:222222222
le Worker: C

Figure 69 Incident Ready for Review Email

CAUTION: This email originated from outside the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe. Unlock email [Unlocked] Children Incidents Tracking and Reporting Application. Participant ID: xxxxxxxxx Responsible Worker: aBBB,Cddddd Reason: SSSSSSSSS Additional Information to Send to Agency: Comments as to why the incident was unlocked.

Figure 70 Unlock Email

• **EXIT**—This option will take the user back to the Incidents dashboard.

6 Creating an Incident for an Unlisted Participant

This function allows the user to create a new incident for a participant who may be in the process of being enrolled or transferred to an agency but is not yet listed on the Agency Participants dashboard or for a participant who is only enrolled in the Children's Community Options Program (CCOP) and does not have enrollment in ForwardHealth.

1. Click **Create a New Incident** located on the menu bar of the Incidents or Agency Participants dashboard near the top of the page.



Figure 71 Create a New Incident

2. A dialog box will appear to confirm the user wants to create a new incident.

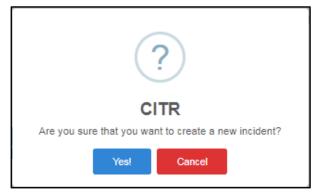


Figure 72 Dialog Box

 Click Yes! Follow the steps in the "Creating an Incident for a Participant Enrolled in CLTS" section beginning with <u>Step 5</u>.

7 Legacy Incident Data

The Legacy Incident Data panel displays the historical data from the manual process that the CITR application is replacing. This data is for historical purposes only and cannot be edited. Legacy data will be included when conducting a search for previous incidents.

1. To view a participant's legacy incident data, click **Legacy Incident Data** located on the menu bar of the Incidents or Agency Participants dashboard near the top of the page.



Figure 73 Legacy Incident Data

2. A dialog box will appear to confirm the user's selection.



Figure 74 Dialog Box

3. Click Yes! Legacy data for each participant will be displayed across nine columns.

Show 10 v entries Search:											
Organization ID	Participant ID	Participant Name	Received Date	Report Date	Report Type	Incident Date	🗘 Incident Setting	Incident Setting Other			
78000001	101010101	Sammy A Sam	2017-12-11 00:00:00.0	2017-11-15 00:00:00.0	1	2017-10-31 00:00:00.0	Child's Home				
78000001	2121212121	Don B Donald	2017-10-12 00:00:00.0	2017-10-10 00:00:00.0	2	2017-10-10 00:00:00.0	Child Care Center				
78000001	6565656565	Kenny C Kendal	2017-12-13 00:00:00.0	2017-09-05 00:00:00.0	3	2017-09-01 00:00:00.0	Community Setting				
78000001	7474747474	Madisonmiddleton Stoughtonveronafitchburg	2017-01-15 00:00:00.0	2017-01-15 00:00:00.0	1	2017-01-15 00:00:00.0	Other	Hospital			
78000001	8989898989	Joe D Johnsonsmithski	2017-11-14 00:00:00.0	2017-08-01 00:00:00.0	4	2017-04-06 00:00:00.0	Day Treatment Program				

Figure 75 Legacy Data Listing

The panel may include the following information:

- The Organization ID column displays the identification number of the organization.
- The Participant ID column displays the identification number of the participant.
- The Participant Name column identifies the participant.
- The *Received Date* column displays the date DHS received the incident report.
- The *Report Date* column displays the date the incident allegation was reported to the CWA.
- The *Report Type* column displays one of the following report types.
 - a. 1 = Original incident report
 - b. 2 = Update to incident report
 - c. 3 = Correction to incident report
 - d. 4 = Incident report closed.
- The *Incident Date* column displays the date the incident occurred.
- The *Incident Setting* column displays the location the incident occurred.
- The *Incident Setting Other* column displays the location the incident occurred if "Other" is selected from the drop-down menu for the incident setting.

Note: The user can search for any of the fields displayed on the panel by populating the **Search** box.

8 Reports

Reports are available to both users and State administrators. Users can run reports only for the organizations they are associated with while State administrators can run reports for all organizations. Multiple organizations can be selected to be included in one report.

1. To view a participant's legacy incident data, click **Reports** located on the menu bar of the Incidents or Agency Participants dashboard near the top of the page.



Figure 76 Reports

2. A dialog box will appear to confirm your selection.



Figure 77 Dialog Box

3. Click Yes! The Reports panel will be displayed.

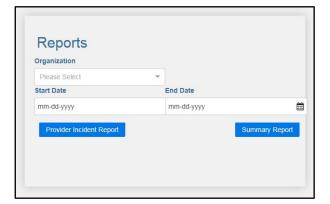


Figure 78 Reports Panel

- 4. Enter the name of the organization in the *Organization* field using the drop-down menu.
- 5. Enter the start date in the *Start Date* field using mm-dd-yyyy format or use the calendar by clicking the calendar icon that appears to the right of the date format. This date must be equal to or after the incident date and cannot be a future date.
- 6. Enter the end date in the *End Date* field using mm-dd-yyyy format or use the calendar by clicking the calendar icon that appears to the right of the date format. This date must be equal to or after the incident date and cannot be a future date.
- **7.** To view the provider incident report, click the **Provider Incident Report**. The file download window will be displayed.



Figure 79 File Download Window

8. Click Save. The completed file download window will be displayed.



Figure 80 Completed File Download Window

9. Click **Open**. An Excel spreadsheet will be displayed.

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3 2019251 Draft 11	11111111 TESTED T	STER 01-25-2004 Intellectual/Developmental D	isability (I/DD) N	Alleged Perpetr	ator	
4 2019270 In Progress 11	11111111 TESTED T	STER 01-25-2004 Severe Emotional Disturbance		Alleged Perpetr	ator	
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Program	Date the incident occurre	d Date the waiver agency was notified of incident	Incident Type	Where did the incident occur?		
Children Long Term Support	11-01-2019	11-01-2019	Abuse			
Children Community Options Program	n 11-01-2019	11-02-2019	Abuse	Supported Living Arrangement		
Children Community Options Program	11-01-2019	11-01-2019	Behavioral, Other	Supported Living Arrangement		
Children Long Term Support	11-01-2019	11-02-2019				
Children Long Term Support	11-01-2019	11-02-2019				
Provider (+)						

Figure 81 Provider Incident Report

The provider incident report includes the following data elements:

• Incident ID—Displays the identification number of the incident.

- Incident Status—Displays the status of the incident.
- *Participant ID*—Displays the ID number of the participant.
- *Child LN*—Displays the last name of the participant.
- *Child FN*—Displays the first name of the participant
- *Child DOB*—Displays the date of birth of the participant.
- *Target Group*—Displays one of three target groups the participant is eligible for:
 - a. I/DD: Intellectual/Developmental Disability
 - b. SED: Severe Emotional Disturbance
 - c. PD: Physical Disability
- Vulnerable Child (Y/N)—Indicates Y (yes) or N (no) if the participant is a vulnerable child.
- *Provider involvement with the incident*—Identifies the provider's involvement with the incident.
- *Responsible Agency*—Identifies the responsible agency.
- *Program*—Displays the program that is serving the participant. Programs include the following:
 - a. CLTS: Children's Long-Term Support Waiver Program
 - b. CCOP: Children's Community Options Program
- Date the incident occurred—Indicates the date the incident occurred.
- Date the waiver agency was notified of the Incident—Displays the date the waiver agency was notified of the incident.
- *Incident Type*—Displays the type of incident (for example, abuse, neglect, behavioral, death).
- Where did the Incident Occur?—Identifies where the incident occurred.
- **10.** To view the summary report, click the Summary Report. The file download window will be displayed.



Figure 82 File Download Window

11. Click **Save**. The completed file download window will be displayed.

The Summary_Report_78000001 - CITR Test1_01-01-2018-10-02-2019 (1).xlsx download has completed.	Open	•	Open folder	View downloads	×

Figure 83 Completed File Download Window

12. Click **Open**. An Excel spreadsheet will be displayed.

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Figure 84 Summary Report

The summary report includes the following data elements:

• *Responsible Agency*—Identifies the responsible agency.

- Incident ID—Displays the ID number of the incident.
- Incident Status—Displays the status of the incident.
- *Participant ID*—Displays the ID number of the participant.
- *Child LN*—Displays the last name of the participant.
- *Child FN*—Displays the first name of the participant.
- *Child DOB*—Displays the date of birth of the participant.
- *Child Gender*—Displays the gender of the participant.
- Living Arrangement—Displays the participant's current living arrangement.
- *Target Group*—Displays one of three target groups the participant is eligible for:
 - a. I/DD: Intellectual/Developmental Disability
 - b. SED: Severe Emotional Disturbance
 - c. PD: Physical Disability
- Vulnerable Child (Y/N)—Indicates Y (yes) or N (no) if the participant is a vulnerable child.
- *Program*—Displays the program that is serving the participant. Programs include the following:
 - a. CLTS: Children's Long-Term Support Waiver Program
 - b. CCOP: Children's Community Options Program
- Incident Date—Indicates the date the incident occurred.
- Incident Type—Displays the type of incident (for example, abuse, neglect, behavioral, death).
- Date the waiver agency was notified of incident—Displays the date the waiver agency was notified of the incident.
- Who reported the incident to the waiver agency?—Identifies who reported the incident to the waiver agency.
- *Entity CWA contacted*—Identifies the entity the CWA contacted.
- Date DHS was notified—Displays the date DHS was notified of the incident.
- Date county completed incident—Displays the date the county completed the incident.
- *Date of DHS certification*—Displays the date DHS granted certification.

- *Where did the incident occur?*—Identifies where the incident occurred (for example, family home, school, child care).
- *County where incident occurred*—Displays the county in which the incident occurred.
- *Is the participant currently under a court order?*—Indicates Y (yes) or N (no) if the participant is currently under a court order.
- *Provider involvement with the incident*—Indicates Y (yes) or N (no) if the provider was involved with the incident.
- Is the parent/legal guardian subject of the investigation?—Indicates Y (yes) or N (no) if the parent/legal guardian was the subject of the investigation.
- *Incident Description*—Displays a description of the incident.

9 Viewing Incident History

This function allows a user to view the prior history of the participant.

- On the Agency Participants dashboard, search for an agency participant using the <u>search</u> <u>function</u>. Input any of the following: the participant's first name, last name, ID, and/or date of birth using the mm-dd-yyyy format or use the calendar by clicking the calendar icon that appears to the right of the date format.
- 2. Click Search. Information about the participant will be displayed across eight columns at the bottom of the screen.
- 3. Click View in the View History column for the agency participant.

Incidents	Agency Pa	rticipants	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	~~~~		~~~~	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	un	
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	Last Name Date of Birth mm-dd-yyyy								9				
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Show 10 🗸	entries							1		Search:			
Participant	ID 🔺	Participant Name	Date of Birth	*	Create Incident	\$	View History	¢	Last Incident Date	Enrollment Period	Status		\$
1111111112		Testakai K Fortest	01/16/2004		Create Incident		View		11/01/2019	10/01/2017-Current	Current		
Showing 1 to 1	of 1 entries										Previous	1	Next

Figure 85 View History

4. The <u>Participant Incident History</u> panel will be displayed.

10 Editing an Incident

This function allows the user to edit an existing incident for an agency participant. Note: Incidents in "DHS Review" or "Certified" status cannot be edited and must be unlocked.

1. On the Incidents dashboard, click the Incident ID number in the Incident ID column for the agency participant.

				Children's Incident Tr	acking and Reporting (C	:ITR)			
logout	Dashboard	Create a New Incident	Legacy Incident Data	Reports					
				My	Incidents				
	Draft		In Progress	Pending	State Revi	ew	Certified	Unlocked	
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Figure 86 Edit Incident

2. A dialog box will appear to confirm the user's selection.

?
CITR
Are you sure that you want to edit the incident?
Yes! Cancel

Figure 87 Dialog Box

3. Click Yes! The user will be able to access and edit all the panels associated with the incident.

11 <u>Appendix A: Security Roles and</u> <u>Allowable Functions</u>

	State Super User	State Program User	State Regional User	Security Officer Waiver Agency	Waiver Agency Administra tor	Waiver Agency Level 1	Waiver Agency Level 2
All Access	Х						
View Records	X	Statewid e	Assigned specific organizati ons for email notificatio ns Statewide	Agency Specific	Agency Specific	Agency Specific	Agency Specific
Edit	Х				Х	Х	Х
Add New Records	Х				X	X	Х
Delete Records	х				X	Х	
Certify Data- Final State	Х	X	Х				
Unlock a Closed Incident	X	X	Х				
Password Administratio n	X			X			
Add a New User	Х			X			
Inactivate a User	Х			Х			
Send for State review	Х				X	Х	
Upload File to Incident	х				X	Х	Х

	State Super User	State Program User	State Regional User	Security Officer Waiver Agency	Waiver Agency Administra tor	Waiver Agency Level 1	Waiver Agency Level 2
Reports	Statewi de	Statewid e	Statewide	Agency Specific	Agency Specific	Agency Specific	Agency Specific
Inactivate an incident	X	X	Х	X	X	X	X

Specific notes and responsibilities for certain security roles include the following:

- Only the State Regional User should receive notification emails only for incidents from their assigned agencies.
- The State Program User role should allow Bureau of Children's Services staff to view all incident reports in the state without receiving notification emails.
- The Bureau of Children's Services may designate a staff person(s) to be assigned the State Super User role that is responsible for granting and modifying state user roles, assigning agencies, and deleting access.
- The State Super User or the help desk is able to inactivate a Regional User and set up a new one. They are also able to modify the permissions and organizations within the region.
- A Waiver Agency user may inactivate incidents for which they are the responsible worker.

12 <u>Appendix B: Supported Web</u> <u>Browsers</u>

When the user launches the CITR application, it is presented through their <u>web browser</u> on a Microsoft Windows, Apple macOS, or Apple iPad computing platform. The supported web browsers are listed in the following table. The left column identifies the computing platform with the web browser name and the versions supported across the row.

If the user is not familiar with the computing platform and web browser they are using, they should contact their local county IT staff for assistance. The user can contact the <u>Helpdesk to</u> <u>support CITR users</u> if their local IT technical resource is not able to support their request.

Example: If a user uses a Windows platform running the Chrome web browser, the Help=>About Google Chrome menu in the Chrome web browser control panel needs to state version number 79 or back level. If it is higher than version 79, it should still work as it is a "back level" supported application.

If the user is using a web browser that does not have *back level* support listed, they should consider moving to one of the web browsers that does, which are listed in blue in the following table.

Children's Incident Tracking and Reporting User Guide

Su	pported We	b Browsers f	or the Childr	en's Inciden	t Tracking Re	eport Applica	tion			
Platform	Operating System	Web Browser								
	Version	Edge	Firefox	Chrome	Opera	Yandex	Safari			
Windows	7, 8, 8.2, 10 and XP	V 79 and XP not supported	V72 and back level*	V79 and back level*	V67 and back level*	V14.12	Not Supported			
macOS	Catalina Mojave High Sierra Mavericks Sierra Yosemite El Capitan	V79	V72 and back level*	V72 and back level*	V67 and back level*	V14.12 Not available on Catalina release	V13 and back level*			
• iPh	iPad Pro 12 iPad Pro 11 iPad Pro 12 iPad Pro 9.7 phones are r one Operatir	.9 2018 V 12 .9 2018 V 13 2018 V 12 .9 2017 V 11 7 2018 V 11 100 supporte ng System (iO ing System no	<mark>d.</mark> S) not suppo		•		•			

* Web browser versions that are still available prior (back level) to the version listed are supported.

13 Appendix C: Support Resources

If the user has questions or needs assistance, the following resources are available:

- Helpdesk to support CITR users is available Monday through Friday from 8 a.m.-4:30 p.m. Closed on weekends and holidays.
- Contact the helpdesk: <u>VDXCLTCIESHelp@wisconsin.gov</u>
- CWA CLTS supervisor/lead—Is the contact for approving and submitting user access requests. The CWA CLTS supervisor/lead is required to submit the <u>Encounter New User</u> <u>Request form</u>, F-21334, to the helpdesk in order to grant access for new users to the CITR application.

Please be prepared to supply the following:

- Personal contact information to confirm identity including name, employee ID, work location, and phone number
- A brief description of the issue
- When the issue needs to be resolved

14 Appendix D: Data Fields and Menu Options

Data fields and the available drop-down menu options for each field are listed below:

14.1 Incident Type

- 01—Abuse
- 03—Death
- 07—Exploitation
- 05—Hospitalization
- 04—Law Enforcement
- 06—Neglect
- 08—Unapproved use of Restrictive Measures
- 99—Other

14.2 Incident Type Detail

- 01—Abuse—Emotional or psychological
- 03—Abuse—Physical
- 04—Abuse—Sexual or exploitation
- 07—Abuse—Verbal
- 12—Death—Anticipated
- 11—Death—Other
- 15—Death—Suicide
- 16—Death—Unexplained
- 18—Exploitation—Financial misappropriation of the participant's funds or property
- 40—Hospitalization—Error in medical or medication management that result in a significant adverse reaction
- 42—Hospitalization—Psychiatric: Private facility

- 41—Hospitalization—Psychiatric: State facility
- 44—Law enforcement—Contact
- 38—Law enforcement—Contact: Behavioral emergency
- 39—Law enforcement—Investigation
- 20—Law enforcement—Investigation: Alleged perpetrator
- 22—Law enforcement—Investigation: Alleged victim
- 43—Neglect—Dangerous living situation
- 30—Neglect—Lack of food/nutrition
- 32—Neglect—Lack of supervision
- 29—Neglect—Medical/Failure to seek medical attention
- 37—Unapproved use of Restrictive Measures—Misuse of mechanical restraint or protective equipment
- 46—Unapproved use of Restrictive Measures—Use of isolation or seclusion
- 45—Unapproved use of Restrictive Measures—Use of manual restraint
- 99—Other

14.3 Where did the incident occur?

- 07—Adult Family Home
- 34—Child care
- 14—Children's Group Home
- 18—Community setting
- 08—Foster Home
- 11—Own Home/Apartment
- 19—Residential setting (not participant's home)
- 21—Respite setting
- 25—School
- 31—Transporting of participant
- 98—Unknown

• 99—Other

14.4 <u>Outcome</u>

- 01—Abuse—Citation
- 02—Abuse—Criminal conviction
- 03—Abuse—Other
- 04—Abuse—Substantiated by a government agency
- 05—Abuse—Unable to substantiate
- 06—Abuse—Unsubstantiated by a government agency
- 07—Death—Abuse
- 08—Death—Accident
- 14—Death—Neglect
- 15—Death—Other
- 19—Death—Suicide
- 20—Death—Unexplained
- 40—Exploitation—Substantiated by a government agency
- 41—Exploitation—Unable to substantiate
- 42—Exploitation—Unsubstantiated by a government agency
- 21—Hospital—Hospitalization due to involuntary psychiatric emergency
- 22—Hospital—Hospitalization due to urgent medical emergency
- 23—Hospital—Hospitalization due to voluntary psychiatric emergency
- 26—Law enforcement—Other or unknown
- 27—Law enforcement—Participant committed a crime
- 28—Law enforcement—Participant did present a safety risk to self or others
- 30—Law enforcement—Participant was the victim of a crime
- 32—Medication error
- 35—Missing person—Participant or caregiver located after unanticipated absence
- 36—Missing person—Participant or caregiver still missing after unanticipated absence

- 29—Neglect—Citation
- 33—Neglect—Criminal conviction
- 34—Neglect—Other
- 37—Neglect—Substantiated by a government agency
- 38—Neglect—Unable to substantiate
- 39—Neglect—Unsubstantiated by a government agency
- 43—Out of home placement
- 99—Other

14.5 <u>Remediation Action 1</u>

- 02—Change personnel working with the participant
- 03—Change provider agency
- 04—Court order (participant)
- 05—Court order (provider)
- 06—Criminal conviction (participant)
- 07—Criminal conviction (provider)
- 08—Emergency detention
- 09—Increase external monitoring (for example, CPS, APS)
- 10—Mental health inpatient admission
- 23—No remediation action
- 11—Participant was or will be relocated to another setting
- 14—Provider education on appropriate use of emergency restrictive measures
- 15—Provider license revoked
- 16—Provider training
- 17—Referral to Disability Rights Wisconsin
- 18—Referral to district attorney/law enforcement agency
- 19—Report to CPS or APS
- 20—Report/Refer to caregivers

- 21—Terminate service
- 22—Terminate staff
- 99—Other

14.6 Preventative Strategy 1

- 01—Add new support or service
- 23—Add or change backup/crisis plan
- 02—Behavior intervention plan, initiate or modify
- 03—Behavioral consult
- 04—Change provider staff serving the participant
- 05—Dietary change(s)/modification(s)
- 06—Environmental modification
- 07—Extension of treatment or supervision
- 10—In-Home support, initiate or increase
- 08—Increase supervision of participant
- 09—Individualized Education Plan review
- 11—Medically related consult
- 12—Medication review and/or adjustment
- 13—Modify Individual Service Plan
- 22—No preventative strategy
- 14—Participant education about boundaries, safe decision-making, and risks
- 15—Provider training or retraining
- 16—Referral for a new support or service
- 17—Referral, psychiatric
- 18—Restrictive measures application, initiate
- 19—Support and Service Coordinator and/or service team makes more frequent contact with participant/provider
- 20—Team meeting to discuss prevention plan with provider(s)/participant/guardian/family and confirm the prevention and remediation actions each member will implement

- 21—Terminate service
- 99—Other

12 Appendix E: Glossary

Children's Long-Term Support Waiver Program (CLTS): The CLTS Waiver Program is a Home and Community-Based Service (HCBS) Waiver that provides Medicaid funding for children who have substantial limitations in their daily activities and need support to remain in their home or community.

Children's Community Options Program (CCOP): The CCOP provides supports and services to children living at home or in the community who have one or more of the following long-term disabilities – developmental disabilities, physical disabilities, and/or severe emotional disturbances.

Participant ID: This ID is the ForwardHealth Participant ID or Master Client Index (MCI) ID.

Vulnerable Child: A vulnerable child is a child who is either eligible for more than one of the three target groups served by the CLTS programs (intellectual/developmental disability, physical disability, or severe emotional disturbance), as determined by the Children's Long Term Support Functional Screen (CLTS FS), or has a high level of life-sustaining needs (nutrition, fluids, or medical treatment) with a limited informal support network. In addition, at least one of the following must apply:

- The child is isolated with limited or no adult contact outside the home and is not available to be observed.
- The child is nonverbal and unable to communicate.
- The child is medically complex, requires significant care from a caregiver or parent, and is highly dependent on others to meet basic needs.
- The child is the subject of current or historical child abuse and neglect reports.
- The child has a primary caregiver who is actively abusing substances.
- The child is dependent on caregivers or parents with limited cognitive, emotional, and/or behavioral capacity to provide for these needs.

Incident Review Statuses:

- Draft—This status indicates the incident report is still being drafted.
- In Progress—This status indicates initial notification to DHS has been made but the waiver agency has not completed the report. The status is changed from "Draft" to "In Progress" when the user selects "Save & Send to DHS" on the <u>Finalize Initial Save panel</u>.
- Pending—If any one of the following substantiation questions from the <u>Final Incident</u> <u>Details panel</u> are answered as "Pending," the incident status will indicate the report is pending at the final submission to DHS. When all the questions are answered with a "Yes"

or "No" response, the incident will have a status of either "Certified" or "State Review" when it is submitted to DHS:

- a. Did this incident result in a substantiated finding of abuse by a government agency?
- b. Did this incident result in a substantiated finding of neglect by a government agency?
- c. Did this incident result in a substantiated finding of exploitation by a government agency?

Note: When an incident has been in the status of pending for 60 days, an email will be sent warning that the user is approaching the 90-day limit and reminding them to update the incident report. Another email will be sent when an incident has been in a status of pending for 90 days and they will be reminded to update the incident report.

- State Review—This status indicates the incident report has been completed by the waiver agency and DHS is reviewing.
- Certified—This status indicates that DHS has completed review, and the incident report is complete.
- Unlocked—This status indicates the State administrator has unlocked the incident report to allow the user to edit the incident after it has been sent to DHS. This is usually done when DHS requires additional information.