

Provider Update from the Division of Provider Services and Quality Assurance

Training for Online Submission of Incidents
and Accidents (ELS)



Division of Provider Services & Quality Assurance



ARKANSAS
DEPARTMENT OF
**HUMAN
SERVICES**

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Division of Provider Services & Quality Assurance

DPSQA is comprised of 3 units who work together in investigating maltreatment:

Office of Long-Term Care – They license and inspect nursing facilities, intermediate care facilities, and psychiatric residential treatment facilities; license nursing facility administrations; investigate complaints against long-term care facilities and their employees; and determine medical eligibility for Medicaid for long-term care facility placement and waiver services.

Office of Community Services – They license, certify, and regulate home- and community- based programs, ARChoices waiver, and alcohol and other drug abuse treatment providers and review concerns, complaints, and allegations of substandard quality of care as it relates to facility practices.

Office of Performance and Engagement – One of our first points of contact for allegations of maltreatment. They receive calls and emails through various sources and send them to the appropriate unit for investigations.

Division of Provider Services & Quality Assurance

The link to log into the Provider Portal of the Enterprise Licensing System (ELS) is:

https://ardhslicensing.my.site.com/elicensing/s/?language=en_US

We recommend using Google Chrome or Microsoft Edge to access all of the system's capabilities.

Enterprise Licensing System (ELS)



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Enterprise Licensing System (ELS)

Everyone who will be submitting Incident and Accident reports on behalf of the facility will need to create an account. For example, the Administrator, Director of Nursing, the Charge Nurse, or the office staff in some cases may be responsible for reporting.

Because there are strict timelines based on discovery of and the type of incident, facilities may want to have more than one individual be able to submit I&A reports.

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Login

Welcome back! Please sign into your account.

*Username

*Password

I'm not a robot  reCAPTCHA
[Privacy](#) - [Terms](#)

Login

Forgot your Password? [Click here](#)

Not a member? [Register here](#)



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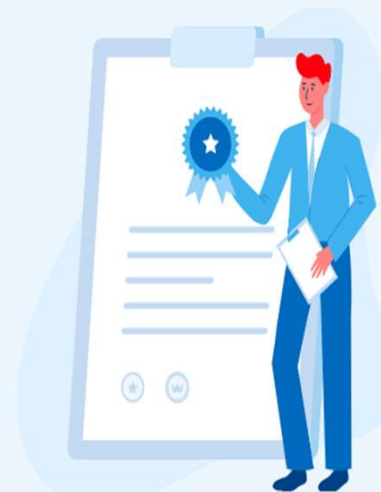
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User Registration

Are you an Owner or acting on the behalf of an Owner?

[Already a User? Click here](#)



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User Registration

Register for creating a Provider Account.

* First Name

* Last Name

* Email

* Confirm Email

* Date of Birth

* Social Security Number



* Security Question

* Answer to Security Question

 I'm not a robot [Previous](#)

The person registering is not required to submit their personal SSN. The system will accept four numbers in order to proceed.



Enterprise Licensing System (ELS)

Once you complete your registration for the Enterprise Licensing System (ELS) database, send DPSQA the following information to connect your facility to your specific log in:

- ✓ Email address used to create account
- ✓ Legal Name of each facility
- ✓ License/Certification numbers for each facility
- ✓ Your official title (Administrator, Director of Nursing, Owner, CEO, etc.)
- ✓ Your phone number

Enterprise Licensing System (ELS)



WHY IS THIS IMPORTANT?



You will not be able to connect your login to your facility. Only DPSQA can connect you to your facility to help ensure the integrity of the information for each facility. Once DPSQA connects a person to the facility, they will be able to see all of the facility's information. Therefore, it is important the facility determines who should and should not have access to the facility's information. DPSQA is not responsible for who has access on behalf of the facility.

Enterprise Licensing System (ELS)

Please email this information to:

HCBS Providers:

DPSQA.ProviderApplications@dhs.arkansas.gov

OLTC Providers:

OLTC.LicensureCertification@dhs.arkansas.gov

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Welcome, DPSQA Test Provider

Please choose one of the Agency Types to get started.



Child Care Licensing

The Licensing Unit is responsible for the enforcement of the Child Care Licensing Act for registered childcare family homes, licensed homes, and licensed childcare centers in Arkansas.

Manage



Placement and Residential Licensing

The Placement and Residential Licensing Unit (PRLU) is responsible for enforcing the Child Welfare Agency Licensing Act for Residential, Emergency Residential, Psychiatric Residential Treatment, Independent Living Facilities, and Child Placement Agencies that place foster children.

Get Started



Home & Community Based Services Licensing

Home and Community Based Services licenses, certifies, and regulates assisted living facilities, home and community-based programs day treatment programs, and alcohol and drug abuse treatment providers. This unit also reviews concerns, complaints, and allegations of substandard care as it relates to facility practices.

Manage



Long Term Care Licensing

Office of Long-term Care licenses, surveys, and regulates long term care facilities, such as skilled nursing facilities. This unit also investigates all nursing home complaints.

Manage



Enterprise Licensing System (ELS)



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Welcome, DPSQA Test Provider

Please choose one of the Agency Types to get started.

New Notifications

Form 742 has been received for DPSQA Test.
Our office has received a 742 submitted by your facility.
5 July, 2023 •

Form 731 has been received for DPSQA Test.
Our office has received a 731 submitted by your facility. The 742 must be submitted to DPSQA



Child Care Licensing

The Licensing Unit is responsible for the enforcement of the Child Care Licensing Act for registered childcare family homes, licensed homes, and licensed childcare centers in Arkansas.

Manage



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Manage



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Manage



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Division of Provider Services and Quality Assurance - Office of Long-Term Care

Welcome,
DPSQA Test Provider

You can apply for new applications here and use your dashboard to edit and track the status of previously created applications.



Resources



Manage Applications

[Get Started →](#)



Manage Facilities

[Get Started →](#)



Online Payments

[Get Started →](#)



Incidents and Accidents

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Division of Provider Services and Quality Assurance - Home and Community Based Services

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List of Facilities

Sort By

Select an Option

Facility No.	Facility Name	License/Certification Type	Provider Type	Facility Status	Action
[REDACTED]	[REDACTED]	Behavioral Health Agency		Regular	View
[REDACTED]	[REDACTED]	Adult Day Health Care (ADHC)	ADHS	Regular	View
00046904	Test facility	Community Support Systems Provider	Base	Regular	View
00046760	Test Provider AR Choices	AR Choices Provider Certification	AR Choices - PERS	Regular	View
[REDACTED]	[REDACTED]	Alcohol & Other Drug Abuse Treatment Program	SA - Adult Outpatient, SA - Adult Partial Day Treatment	Operational Permit	View
[REDACTED]	[REDACTED]	Early Intervention Day Treatment (EIDT)	Center Based, CHMS	Regular	View



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Division of Provider Services and Quality Assurance - Home and Community Based Services

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[My Cases](#) ¹ [Start New Case](#) ¹



Sort By

Select an Option

Case Number	Facility Number	Facility Name	Type of Incident	Created Date	Status	Status Date	Action
014299	32341	DPSQA Test	Abuse	07/05/2023	Submitted	07/05/2023	View

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Division of Provider Services and Quality Assurance - Home and Community Based Services

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My Cases ^① [Start New Case ^①](#)

Instructions

- ✓ Provide necessary information to complete the 731 Incident Information.
- ✓ You may save the case prior to completion and return at a later time to complete and submit.
- ✓ Documents can be uploaded prior to submitting the 731 Incident Information.
- ✓ After submission of the 731 Incident Information, you will have five (5) days to submit the 742 Reporting Information.
- ✓ Submitted information can be accessed from the My Cases tab on the Facility Cases page.

[Start New Case](#)



Enterprise Licensing System (ELS)

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New Incident & Accident:
DPSQA - Incident & Accident - HCBS

i 731 - Incident & Accident Information

*Mandatory field

▶ 731 - Incident & Accident Information

🔒 731 - Information

🔒 731 - Documentation

🔒 731 - Review

🔒 731 - Sign and Submit

🔒 742 - Information

Case Number

014301

Facility Name

DPSQA Test

Facility Number

32341

Related Case

Status

Case Pending

Status Date

7/7/2023 📅

Name of Involved Resident

Resident Age

Resident Sex

Select an Option ▼

Resident Race

Select an Option ▼

Other Resident Race

* Status of Alleged Perpetrator

Select an Option ▼

If 'Other' Describe



Enterprise Licensing System (ELS)

Date of I&A MM/DD/YYYY	Time of I&A	*Discovery Date MM/DD/YYYY	*Discovery Time
Submitted Date MM/DD/YYYY	Submitted Time		

731 - Facility Address & Contact Information

*Mandatory field

Address 1101-3 SPRING STREET	Address 2
City MOUNTAIN HOME	County Baxter
State AR	Zip Code 72653
Facility Web Address	Facility Email Address testprovider2023@gmail.com
Phone 5013203919	Phone Ext

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Please complete mandatory 731 - Information fields on the page before clicking continue.



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New Incident & Accident:

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742 - Information

731 - Information *Mandatory field

* Staff Reporting I&A

Helmut Zero

* Title

Administrator

* Type of Incident

- Abuse
- Misappropriation of Property
- Neglect
- Other

Specify if Abuse

- Emotional/Mental
- Physical
- Sexual
- Verbal

Other Type of Incident

Specify if Misappropriation of Property

- Drugs
- Personal Property
- Resident Trust Fund

731 - Summary of Incident *Mandatory field

* Notifications

- Administrator
- Doctor
- Family
- Law Enforcement

You must select at least one choice from this set.

* Steps taken during the investigation

Complete this field.



Enterprise Licensing System (ELS)

The next slides demonstrate the process to upload files. Before the file can be uploaded, you must select the type of document you are uploading. The options are:

- Witness statements
- Police report
- Care plan
- Medical records
- Photographs
- Financial records
- Drug screens
- Other



Enterprise Licensing System (ELS)

Videos cannot be uploaded into the system due to IT security restrictions. If there is a video of the incident being recorded, a physical copy must be sent to the I&A Unit at:

Office of Long-Term Care
P.O. Box 8059, Slot 404
Little Rock, AR 72203-8059

Please note the system generated case number associated with the video when submitted to the Office.

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New Incident & Accident:

DPSQA - Incident & Accident - HCBS

731 - Documentation

*Mandatory field

731 - Incident & Accident Information

731 - Information

731 - Documentation

731 - Review

731 - Sign and Submit

742 - Information

Uploaded Documents:

[+ Add Attachments](#)

Document File Name	Document Title	Document Description
Uploaded documents to be displayed here.		

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Enterprise Licensing System (ELS)

The screenshot displays the Enterprise Licensing System (ELS) interface. At the top, there is a navigation bar with the Arkansas Department of Human Services logo and links for Home, Dashboard, Resources, and Contact Us. Below this is a breadcrumb trail: Division of Provider Services and Quality Assurance - Home and Community Based Services. The main content area shows a sidebar with a list of incident types, including '731 - Incident & Accident Information', '731 - Information', '731 - Documentation' (which is selected), '731 - Review', '731 - Sign and Submit', and '742 - Information'. The main panel is titled '731 - Documentation' and contains a form for uploading documents. A modal window titled 'Upload Document' is open, featuring a dashed box for file uploads with an 'Upload Files' button and the text 'Or drop files'. Below this, it lists 'Accepted File Types (PDF, DOCX, PNG, JPEG, DOC, XLSX)'. A required field labeled '* Document Type' has a dropdown menu with 'Select an Option' and a red border, with a red error message 'Complete this field.' below it. The modal has 'Cancel' and 'Upload' buttons. In the background, there are 'Add Attachments', 'Previous', and 'Continue' buttons.

Enterprise Licensing System (ELS)

The screenshot displays the ELS web application interface. At the top, there is a navigation bar with the Arkansas Department of Human Services logo and menu items like 'Home', 'Dashboard', 'Resources', and 'Contact Us'. Below this is a breadcrumb trail: 'Division of Provider Services and Quality Assurance - Home and Community Based Services'. The main content area shows a sidebar with a list of incident and accident records, including '731 - Incident & Accident Information', '731 - Information', '731 - Documentation' (which is selected), '731 - Review', '731 - Sign and Submit', and '742 - Information'. The main panel is titled '731 - Documentation' and contains an 'Upload Document' dialog box. This dialog box has a title bar with a close button and a dashed box for a document preview. Below the preview is an 'Upload Files' section showing a file named 'ELS Test (Stark).docx' (12 KB) with a progress bar and a green checkmark. Below the file list, it says '1 of 1 file uploaded' and has a 'Done' button. At the bottom of the dialog are 'Cancel' and 'Upload' buttons. In the background, there is a '+ Add Attachments' button and 'Previous' and 'Continue' buttons.

Enterprise Licensing System (ELS)

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New Incident & Accident: DPSQA - Incident & Accident - HCBS

731 - Documentation

731 - Incident & Accident Information

731 - Information

731 - Documentation

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731 - Sign and Submit

742 - Information

731 - Documentation

Upload Document

ELS Test (Stark).docx has been Uploaded

*Document Type

Witness Statements

Cancel Upload

Previous Continue

Enterprise Licensing System (ELS)

ARKANSAS DEPARTMENT OF HUMAN SERVICES | Home | Dashboard | Success: Document Uploaded Successfully | [User Profile]

Division of Provider Services and Quality Assurance - Home and Community Based Services

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New Incident & Accident:
DPSQA - Incident & Accident - HCBS

731 - Documentation *Mandatory field

- 731 - Incident & Accident Information
- 731 - Information
- 731 - Documentation**
- 731 - Review
- 731 - Sign and Submit
- 742 - Information

Uploaded Documents:

[+ Add Attachments](#)

Document File Name	Document Title	Document Description
ELS Test (Stark).docx	Witness Statements	 

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DPSQA - Incident & Accident - HCBS

731 - Review

✓ 731 - Incident & Accident Information

✓ 731 - Information

✓ 731 - Documentation

▶ 731 - Review

🔒 731 - Sign and Submit

🔒 742 - Information

731 - Incident & Accident Information

[Edit Details](#) ▼

731 - Information

[Edit Details](#) ▼

731 - Documentation

[Edit Details](#) ▼

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New Incident & Accident:

DPSQA - Incident & Accident - HCBS

731 - Sign and Submit

*Mandatory field

731 - Incident & Accident Information

731 - Information

731 - Documentation

731 - Review

731 - Sign and Submit

742 - Information

I certify that my answers are true and to the best of my knowledge. By checking this box I understand that I am signing this Incident Report electronically.
Complete this field.

*Enter your Name

Complete this field.

*Submitted By

Complete this field.

*Submitted Date

Previous

Submit



Enterprise Licensing System (ELS)

The screenshot displays the Arkansas Department of Human Services' Enterprise Licensing System (ELS) interface. At the top, a navigation bar includes links for Home, Dashboard, Resources, and Contact Us. Below this, a breadcrumb trail reads "Division of Provider Services and Quality Assurance - Home and Community Based Services". The main content area is titled "731 - Incident & Accident Information" and includes a sidebar with steps: "731 - Incident & Accident Information", "731 - Information", "731 - Documentation", "731 - Review", "731 - Sign and Submit" (highlighted), and "742 - Information". The form fields are partially filled: Case Number (014301), Facility Name (DPSQA Test), Facility Number (32341), Status (Case Perpetrator), Name of Involved Resident (Howard Stark), Resident Age (55), Resident Sex (Male), Resident Race (White / Caucasian), and Status of Alleged Perpetrator (Facility Employee). A white modal box in the center of the screen displays the message "Case Submitted Successfully" with a blue "Close" button.



Enterprise Licensing System (ELS)

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My Cases (1) Start New Case (1)

Sort By

Select an Option

Case Number	Facility Number	Facility Name	Type of Incident	Created Date	Status	Status Date	Action
014301	32341	DPSQA Test	Abuse	07/07/2023	Partially Submitted	07/07/2023	View
014299	32341	DPSQA Test	Abuse	07/05/2023	Submitted	07/05/2023	View

< 1 >

New Notifications

Form 731 has been received for DPSQA Test.

Our office has received a 731 submitted by your facility. The 742 must be submitted to DPSQA within five (5) working days from when the incident became known to the facility.

7 July, 2023 •

Form 742 has been received for DPSQA Test.

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DPSQA - Incident & Accident - HCBS

742 - Information

*Mandatory field

731 - Incident & Accident Information

731 - Information

742 - Information

742 - Description of Incident

742 - Findings and Actions Taken

742 - Administrator/Written Designee Must be Notified

742 - Law Enforcement Must be Notified For Abuse

742 - Accused Party Information

742 - Documentation

742 - Review

* Facility Staff Member Completing DMS 742

Complete this field.

* Title of Staff Member Completing DMS-742

Complete this field.

* Date Incident Reported to DPSQA

Complete this field.

* Time Incident Reported to DPSQA

Complete this field.

* Type of Incident

- Abuse
 Misappropriation of Property
 Neglect
 Other

You must select at least one choice from this set.

Specify if Abuse

- Emotional/Mental
 Physical
 Sexual
 Verbal

Specify if Misappropriation of Property

- Drugs
 Personal Property
 Resident Trust Fund

Other Type of Incident

Room #

* Resident Social Security Number

Complete this field.

* Resident Weight

Complete this field.



Enterprise Licensing System (ELS)

 742 - Sign and Submit

*Resident Height

Complete this field.

*Physician

Complete this field.

*Resident Date of Birth

Complete this field.

*Ambulatory?

Complete this field.

*Is Resident Still Living?

Complete this field.

*Mental Functional Level

Complete this field.

*Physical Functional Level/Impairment

Complete this field.

*Primary Diagnosis

Complete this field.

Date of death

*Oriented

- Place
- Person
- Event

You must select at least one choice from this set.

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New Incident & Accident:
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i 742 - Description of Incident

*Mandatory field

✓ 731 - Incident & Accident Information

✓ 731 - Information

✓ 742 - Information

▶ 742 - Description of Incident

🔒 742 - Findings and Actions Taken

🔒 742 - Administrator/Written Designee Must be Notified

🔒 742 - Law Enforcement Must be Notified For Abuse

🔒 742 - Accused Party Information

🔒 742 - Documentation

*Description of Incident

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🔒 742 - Law Enforcement Must be Notified For Abuse

🔒 742 - Accused Party Information

🔒 742 - Documentation

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🔒 742 - Sign and Submit

*Description of Incident

Resident was injured after being punched by CNA Barnes after a car aaxxidnt.

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i 742 - Findings and Actions Taken

*Mandatory field

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742 - Findings and Actions Taken

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* Resident's current medical condition

Complete this field.

* Findings and Actions Taken

* Facility Administrators Signature

* Date

MM/DD/YYYY



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- 742 - Description of Incident
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- 742 - Law Enforcement Must be Notified For Abuse
- 742 - Accused Party Information
- 742 - Documentation
- 742 - Review

* Name of Administrator	* Date	* Time
<input type="text"/>	<input type="text" value="MM/DD/YYYY"/>	<input type="text"/>
* Family Notified	Date	Time
<input type="text" value="Select an Option"/>	<input type="text" value="MM/DD/YYYY"/>	<input type="text"/>
Name of Family Member/Guardian	Relationship	
<input type="text"/>	<input type="text"/>	
Address	Address 2	
<input type="text"/>	<input type="text"/>	
City	State	
<input type="text"/>	<input type="text" value="AR"/>	
Zip Code	Phone Number	
<input type="text"/>	<input type="text"/>	
* Doctor Notified	Date	Time
<input type="text" value="Select an Option"/>	<input type="text" value="MM/DD/YYYY"/>	<input type="text"/>

Enterprise Licensing System (ELS)

* Doctor Notified

Date

Time ⓘ

Doctors Name

Phone Number

* Resident Sent To Hospital

Date

Time ⓘ

* Admitted to Hospital

Name/Address/Phone of Hospital

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Enterprise Licensing System (ELS)

i 742 - Law Enforcement Must be Notified For Abuse

*Mandatory field

Name of Law Enforcement Agency

Date

MM/DD/YYYY



Time i

Address

Address 2

City

State

Select an Option



Zip Code

Phone Number

Investigation Made?

Select an Option



Name of Officer

Date of Investigation

MM/DD/YYYY



Time of Investigation i

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? 742 - Accused Party Information

*Mandatory field

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742 - Accused Party Information

742 - Documentation

Name of Accused Party

Job Title (if any)

Phone Number

Home Address

Home Address 2

City

State

Zip Code

Social Security #

Date of Birth




Date of Current Employment From

 Presentation last saved: Just now

Date of Current Employment To



Enterprise Licensing System (ELS)

-  742 - Documentation
-  742 - Review
-  742 - Sign and Submit

Certified Nursing Assistant <input type="text" value="Select an Option"/>	Registration # <input type="text"/>
Date Issued <input type="text" value="MM/DD/YYYY"/>	Date Criminal Background Check Completed <input type="text" value="MM/DD/YYYY"/>
Licensed By State Board of Nursing <input type="text" value="Select an Option"/>	Date Issued <input type="text" value="MM/DD/YYYY"/>
Type of License LPN# <input type="text"/>	Type of License RN# <input type="text"/>

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New Incident & Accident:
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742 - Documentation *Mandatory field

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- ✓ 742 - Law Enforcement Must be Notified For Abuse
- ✓ 742 - Accused Party Information
- ▶ 742 - Documentation

Uploaded Documents: [+ Add Attachments](#)

Document File Name	Document Title	Document Description
ELS Test (Stark).docx	Witness Statements	✎ 🗑

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Enterprise Licensing System (ELS)

New Incident & Accident:
DPSQA - Incident & Accident - HCBS

742 - Review

- ✓ 731 - Incident & Accident Information
- ✓ 731 - Information
- ✓ 742 - Information
- ✓ 742 - Description of Incident
- ✓ 742 - Findings and Actions Taken
- ✓ 742 - Administrator/Written Designee Must be Notified
- ✓ 742 - Law Enforcement Must be Notified For Abuse
- ✓ 742 - Accused Party Information
- ✓ 742 - Documentation
- ▶ 742 - Review
- 🔒 742 - Sign and Submit

731 - Incident & Accident Information	Edit Details
731 - Information	Edit Details
742 - Information	Edit Details
742 - Description of Incident	Edit Details
742 - Findings and Actions Taken	Edit Details
742 - Administrator/Written Designee Must be Notified	Edit Details
742 - Law Enforcement Must be Notified For Abuse	Edit Details
742 - Accused Party Information	Edit Details
742 - Documentation	Edit Details

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Enterprise Licensing System (ELS)



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New Incident & Accident:
DPSQA - Incident & Accident - HCBS

742 - Sign and Submit

*Mandatory field

731 - Incident & Accident Information

731 - Information

742 - Information

742 - Description of Incident

742 - Findings and Actions Taken

742 - Administrator/Written Designee Must be Notified

742 - Law Enforcement Must be Notified For Abuse

742 - Accused Party Information

742 - Documentation

I certify that my answers are true and to the best of my knowledge. By checking this box I understand that I am signing this Incident Report electronically.

*Enter your Name

Submitted By

*Submitted Date

7/7/2023

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Submit



Enterprise Licensing System (ELS)

Order Services and Quality Assurance - Home and Community Based Services

Incidents & Accidents

Incident & Accident:
Incident & Accident - HCBS

731 - Incident & Accident Information

*Mandatory field

Incident & Accident Information

Information

Information

Description of Incident

Findings and Actions Taken

Administrator/Written Designee Must be

Law Enforcement Must be Notified For

Accused Party Information

Documentation

Case Number

014301

Facility Name

DRSQA Test

Facility Number

32341

Status

Partially Submitted

Name of Involved Resident

Howard Stark

Resident Sex

Male

Resident Race

White / Caucasian

Resident Age

55

Other Resident Race

Form 742 Submitted Successfully

Close



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Enterprise Licensing System (ELS)



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New Notifications

Form 742 has been received for DPSQA Test.

Our office has received a 742 submitted by your facility.

7 July, 2023 •

Form 731 has been received for DPSQA Test.

Our office has received a 731 submitted by your facility. The 742 must be submitted to DPSQA within

Division of Provider Services and Quality Assurance - Home and Community Based Services

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[My Cases](#) ⓘ [Start New Case](#) ⓘ

Sort By

Select an Option

Case Number	Facility Number	Facility Name	Type of Incident	Created Date	Status	Status Date	Action
014301	32341	DPSQA Test	Abuse	07/07/2023	Submitted	07/07/2023	View
014299	32341	DPSQA Test	Abuse	07/05/2023	Submitted	07/05/2023	View

< 1 >



Enterprise Licensing System (ELS)

Facilities will have the capability to print to maintain copies for their records for possible surveys, and to maintain potential requests from regulatory agencies.



Enterprise Licensing System (ELS)

Over the past months, ten facilities have been testing the system and providing feedback. We would like to thank them for their assistance in helping to make this process change possible.

Enterprise Licensing System (ELS)

Due to the feedback we have received, we have altered our go live date from August 1st to September 1st to allow more time for the facilities to register users to access the system, answer questions, incorporate changes based on the feedback from the providers, and provide more training dates.



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Contact Information

IandAReports@dhs.arkansas.gov

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