Deloitte.

AR Developmental Disabilities Services Incident Management Provider Portal User Guide

Division of Disability Services

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2.0	11/18/2022	Draft	Deloitte Consulting
3.0	3/16/2023	Draft	Deloitte Consulting

1 Contents

1 Introduction

1.1 Overview

The ***AR Developmental Disabilities Services Incident Reporting Provider Portal*** facilitates the creation and management of incident reports, which are submitted from Providers. From submitted reports, Providers may submit follow-up actions or view findings from each incident.

1.2 Features

1.2.1. Accessibility

The ***AR Developmental Disabilities Services Incident Reporting Provider Portal*** module shall ensure quality services and comply with the Americans with Disabilities Act of 1990.

2 About This Guide

2.1 Who Should Use This Document?

This guide is intended for the following groups:

- DHS Providers

2.2 Prerequisite Knowledge

Using the ***AR Developmental Disabilities Services Incident Reporting Provider Portal*** module and guide assumes that the user has the following prerequisite knowledge:

- Using a Tablet PC, Laptop, or standard desktop computer
- Internet connectivity with one of the following browsers:
  - Google Chrome
  - Edge

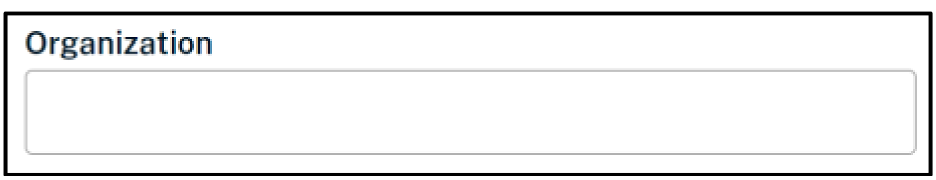
2.3 Common User Interface Elements

2.3.1 Drop-down Lists

A drop-down list allows the user to choose information from a predetermined list that "drops down" when activated. To select an item, move the mouse pointer to the appropriate item in the list and click it.

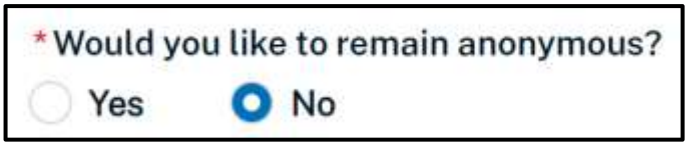
2.3.2 Text Boxes

Text boxes are used to record variable information, and may be either numeric or alpha-numeric, depending on the information being requested. To enter information, tab to or click into the text box and type in the data.



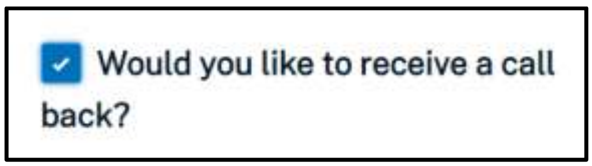
2.3.3 Radio Buttons

Radio buttons can be selected or deselected and may be used to indicated information is true or false. The radio button may also populate additional fields that are conditionally mandatory on the selection.



2.3.4 Checkboxes

Checkboxes can only be checked or unchecked and may be used to indicate information is true or to be included, depending on the information being requested. To check or uncheck a box, move the mouse pointer to the checkbox on the screen and select it.



2.3.5 Required Fields

Required Field text is indicated by the "*" icon before the field name, which guides the user to enter data into the field.

2.3.6 Error Messages

Error messages serve as a prompt for the user to validate a field.

2.3.7 Help Text

Help text is indicated by the "i" icon, which guides the user on what a particular field requires.

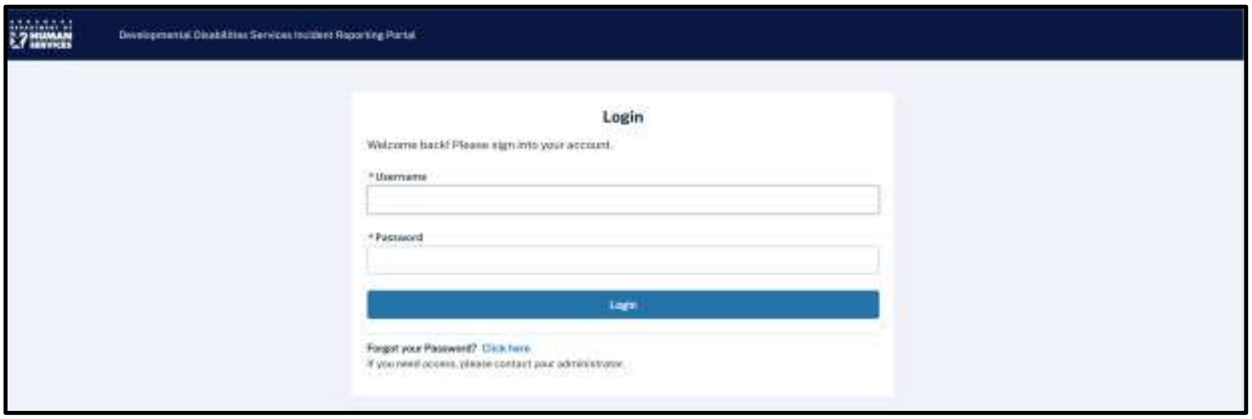
3 Login Page

3.1. Overview

The Login Page is the landing page when the Provider Portal is accessed. This page can be reached by anyone who has the URL of the ***AR Developmental Disabilities Services Incident Reporting Provider Portal*** module.

Provider Portal Link (This link used to go to the Provider Portal)

3.1.1. Screenshot



3.1.1.1. Controls & User Actions

The following table details the controls that are present in the Login Page. Each control and user action includes a description and control type. Each user action includes a description.

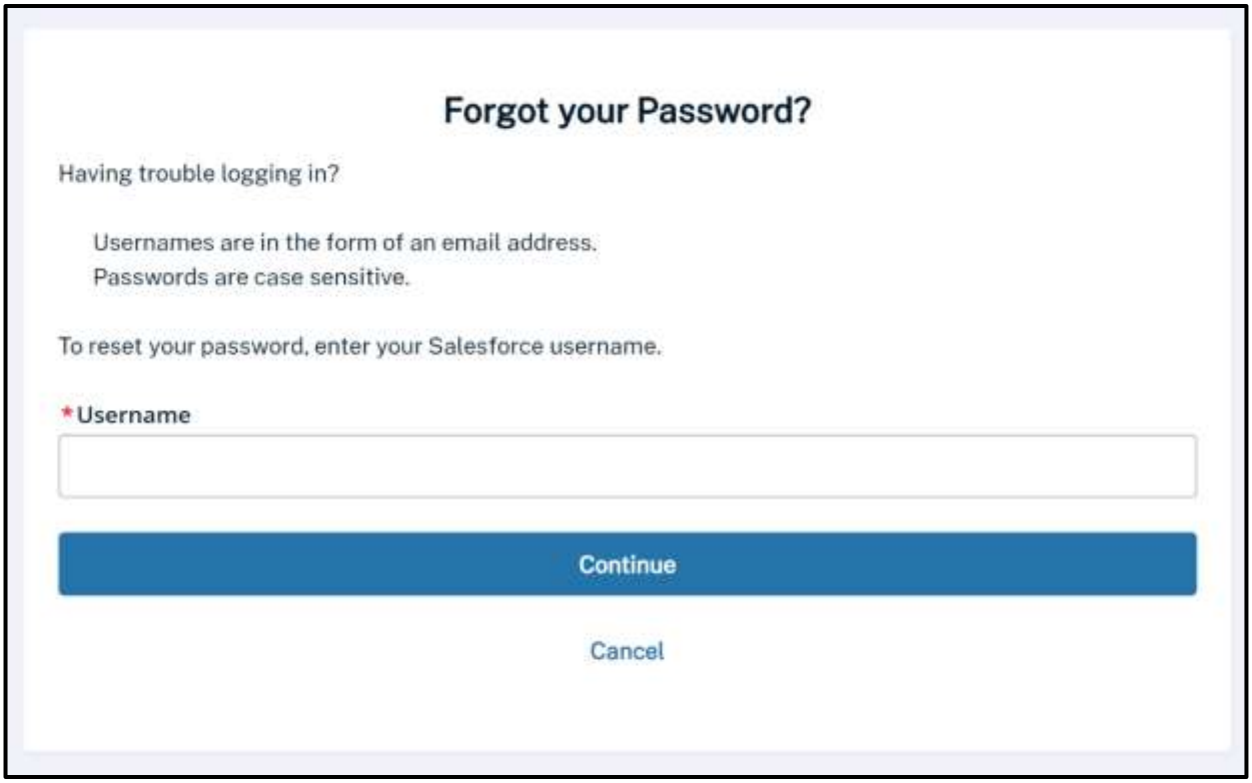
Control	Description	Control Type
Username	Click in the textbox field to enter the username.	Mandatory
Password	Click in the textbox field to enter the password.	Mandatory
Login	Click the 'Login' button to be directed to the Provider Portal homepage.	Always Enabled
Forgot Your Password?	Click the 'Click here' hyperlink to be redirected to the Password Reset Page.	Hyperlink
User Actions	**Description**	
Login	Click the 'Login' button after entering the username and password into the respective text boxes.	

4 Forgot Password

4.2. Overview

The Forgot Password function can be found on the Login Page of the ***AR Developmental Disabilities Services Incident Reporting Provider Portal***.

4.2.1. Screenshot



4.2.1.1. Controls & User Actions

The following table details the controls that are present in the Login Page. Each control includes a description and control type. Each user action includes a description.

Controls	Description	Control Type
Username	Click in the textbox field to enter the username.	Mandatory
Continue	Click the ‘Continue’ button to be directed to the Answer Your Security Question page.	Always Enabled
Cancel	Click the ‘Cancel’ button to cancel the password reset function.	Button
Answer	Click in the textbox field to enter the answer to the security question.	Mandatory
Back to login	Hyperlink that redirects the user to the home login page.	Hyperlink
User Actions	Description	

Reset Password	Click the 'Click Here' button if the account password is forgotten. The user will enter their username, click the 'Reset Password' hyperlink, and then be redirected to further instructions.

5 Homepage

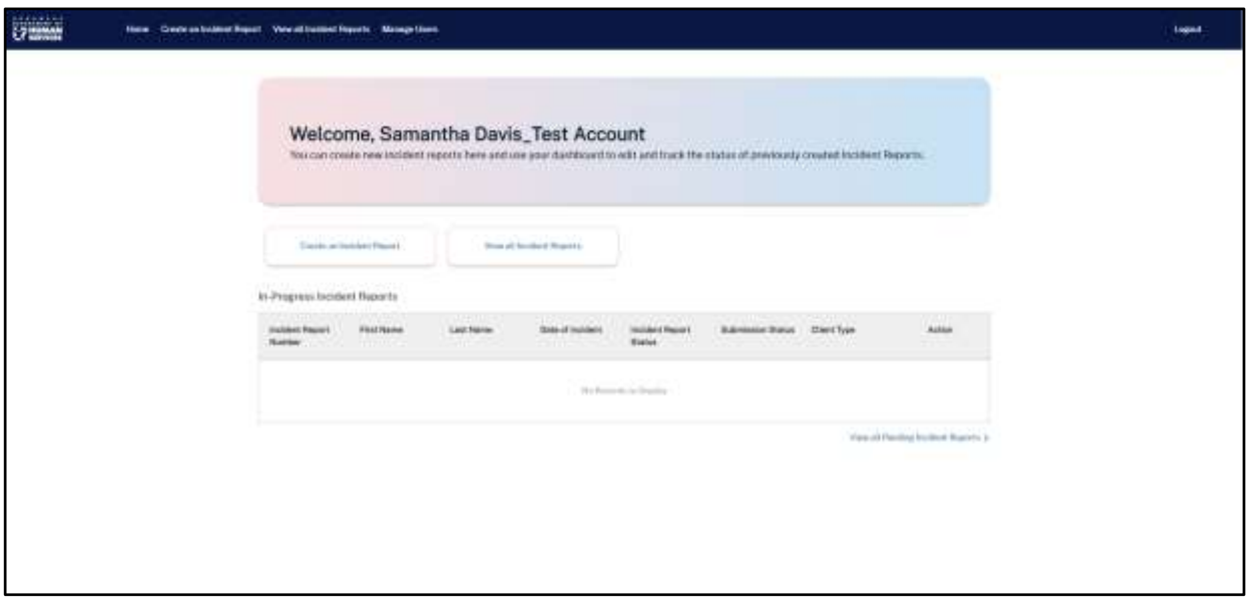
5.1 Overview

The homepage is the landing page when the user successfully accesses the ***AR Developmental Disabilities Services Incident Reporting Provider Portal***. This page can be reached by anyone who has the portal URL.

The homepage consists of the following:

- Top Navigation Bar and Header
- Logout
- Provider Welcome Message
- Incident Report Action Buttons
- In-Progress Incident Reports Table
- Footer

Screenshot



5.1.1.1 Controls & User Actions

The following table details the modules that are present on the ***AR Developmental Disabilities Services Incident Reporting Provider Portal*** homepage. Each control includes a description and control type. Each user action includes a description.

Controls	Description	Control Type
Home	Refreshes the page and navigates to the homepage.	Hyperlink
Create an Incident Report	Navigates to the first section of the incident report creation module.	Hyperlink

View all Incident Reports	Navigates to a list view page of all incident reports the user has created or currently has in progress.	Hyperlink
Manage Users	Navigates to the list view page of all Provider Contact names and details.	Hyperlink
Logout	Logs the user out of their account and navigate them back to the login page.	Hyperlink
Dashboard	Displays a welcome message and header for the In-Progress Incident Reports table.	Always Enabled
In-Progress Incident Reports	Displays all incident report records and details the user currently has in-progress, including Incident Report Number, First Name, Last Name, Date of Incident, Incident Report Status, Submission Status, Client Type, and Action.	Always Enabled
View	Displays the corresponding in-progress incident report.	Hyperlink
View all Pending Incident Reports	Navigates the user to a list view page of all pending incident reports the user has created or currently has pending.	Hyperlink
Footer	Displays various hyperlinks for privacy policy, alerts, security policy, acceptable use, and transparency that redirect the user to State of Arkansas websites.	Always Enabled

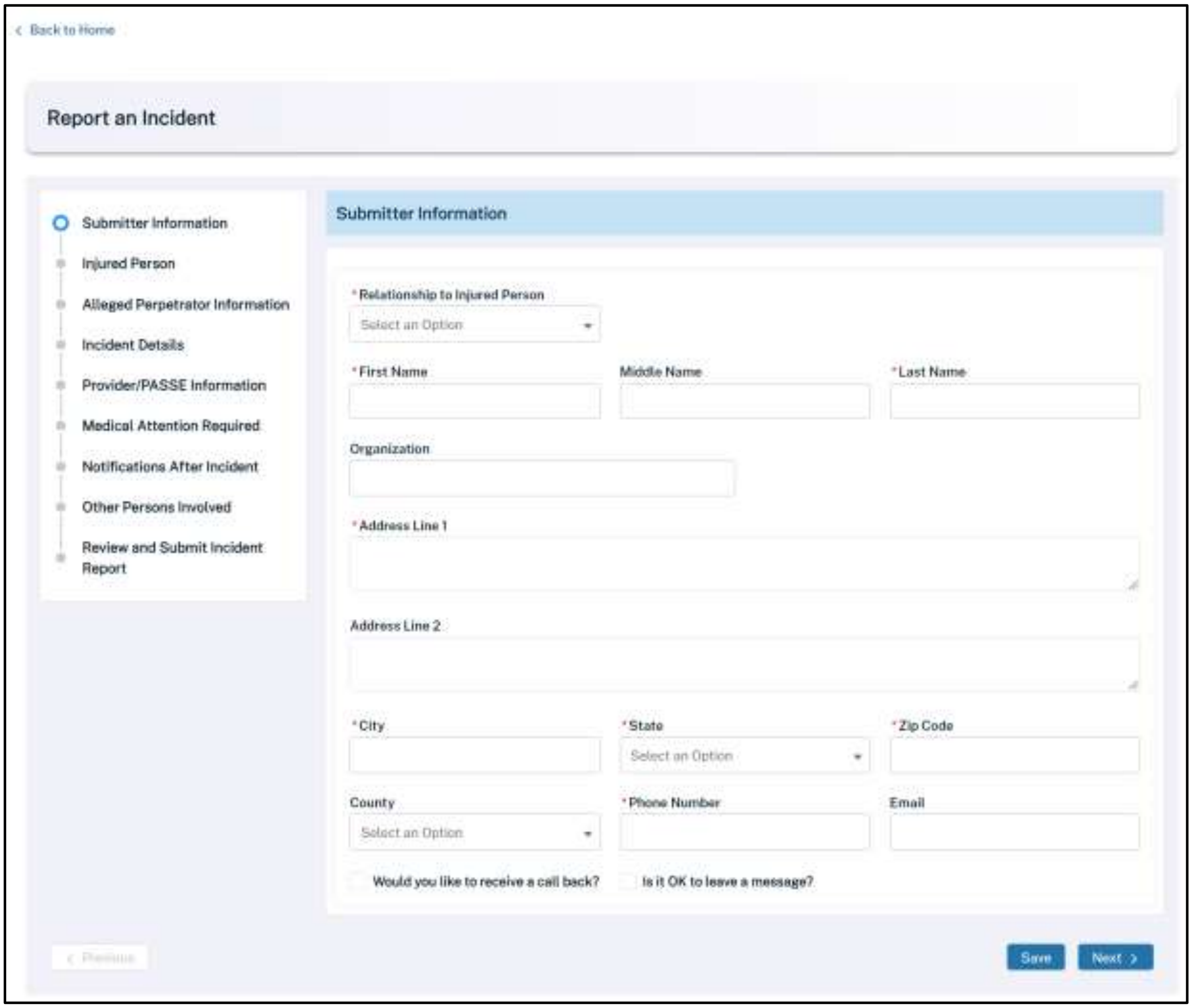
User Actions	Description
Create an Incident Report	Click the 'Create an Incident Report' button to open the first section of the incident report creation module.
View all Incident Reports	Click the 'View all Incident Reports' button to view all incident reports the user has created or currently has in progress.

6 Create an Incident Report

6.1 Submitter Information

The Submitter Information section of the incident report is mandatory. The submitter must complete fields for contact and personal identification information about themself.

6.1.1 Screenshot



6.1.1.1 Controls & User Actions

The following table details the controls that are present through the Submitter Information section. Each control includes a description and control type. Each user action includes a description.

Controls	Description	Control Type
Relationship to Injured Person	Click the dropdown arrow to select the reporter's relationship to the injured person.	Mandatory

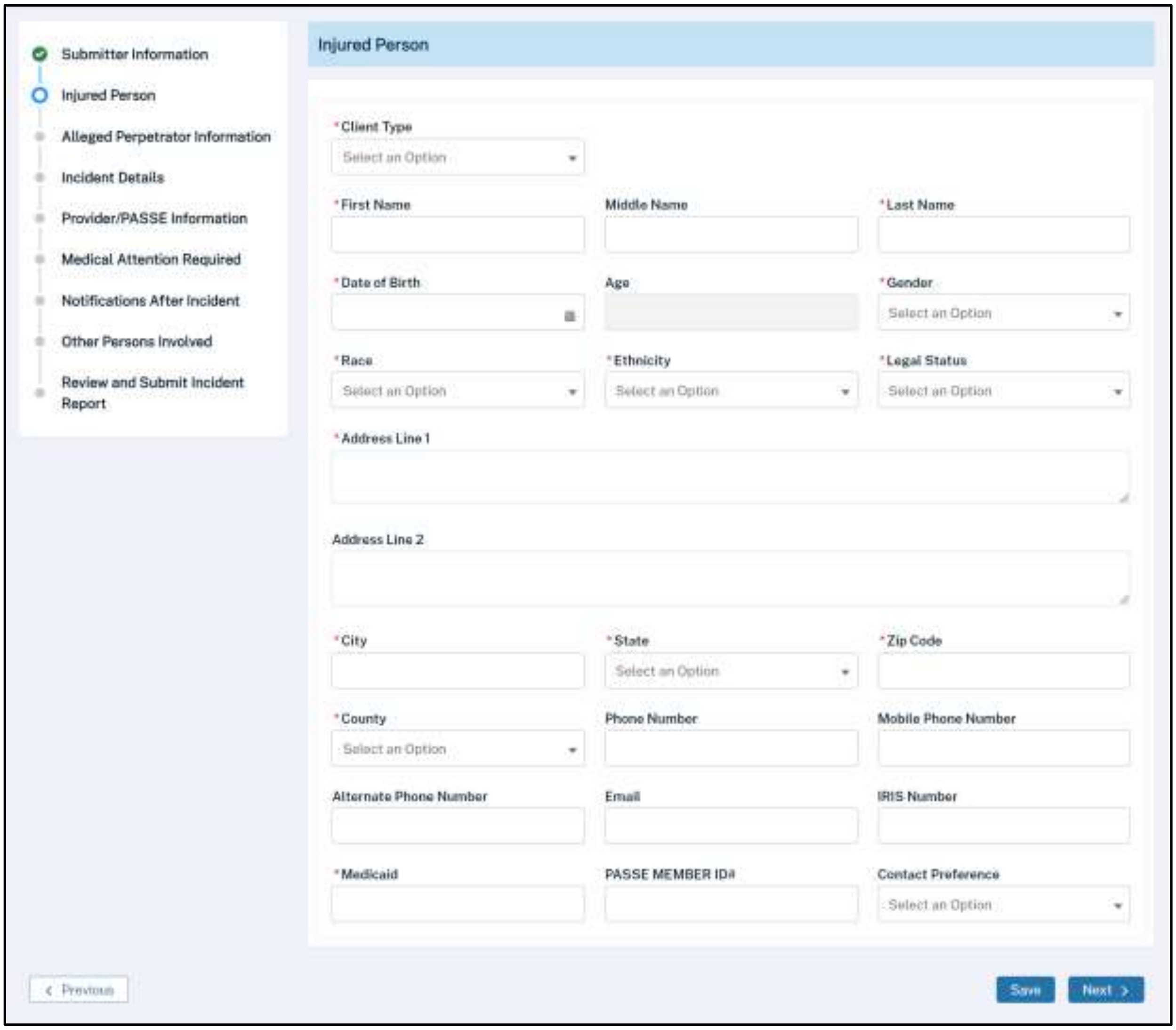
First Name	Click in the textbox field to enter the reporter’s first name.	Conditionally Mandatory
Middle Name	Click in the textbox field to enter the reporter’s middle name.	Not Mandatory
Last Name	Click in the textbox field to enter the reporter’s last name.	Conditionally Mandatory
Organization	Click in the textbox field to enter the reporter’s organization affiliation.	Not Mandatory
Address Line 1	Click in the textbox field to enter the reporter’s Address Line 1.	Conditionally Mandatory
Address Line 2	Click in the textbox field to enter the reporter’s Address Line 2.	Not Mandatory
City	Click in the textbox field to enter the reporter’s city.	Conditionally Mandatory
State	Click the dropdown arrow to select the reporter’s state.	Conditionally Mandatory
Zip Code	Click in the textbox field to enter the reporter’s zip code.	Conditionally Mandatory
County	Click the dropdown arrow to select the reporter’s county.	Conditionally Mandatory
Phone Number	Click in the textbox field to enter the reporter’s phone number.	Conditionally Mandatory
Email	Click in the textbox field to enter the reporter’s email address.	Not Mandatory
Would you like to receive a call back?	Click the checkbox if electing to give permission to receive a call back.	Not Mandatory
Is it OK to leave a message?	Click the checkbox if it is OK to leave a message if the reporter does not answer the phone.	Not Mandatory

User Actions	Description
Save	Click the ‘Save’ button to save the completed information and remain on the page.
Previous	Click the ‘Previous’ button to return to the previous section. This button is disabled on the Reporter Information section.
Next	Click the ‘Next’ button to advance to the next section.
Back to Home	Click the ‘Back to Home’ button to leave the incident report and return to the homepage.

6.2 Injured Person

The Injured Person section of the incident report is mandatory. This section contains fields for contact and personal identification information about the injured person.

6.2.1 Screenshot



6.2.1.1 Controls

The following table details the controls that are present through the Injured Person section. Each control includes a description and control type.

Controls	Description	Control Type
Client Type	Click the dropdown arrow to select the injured person's client type.	Mandatory
First Name	Click in the textbox field to enter the injured person's first name.	Mandatory
Middle Name	Click in the textbox field to enter the injured person's middle name.	Not Mandatory

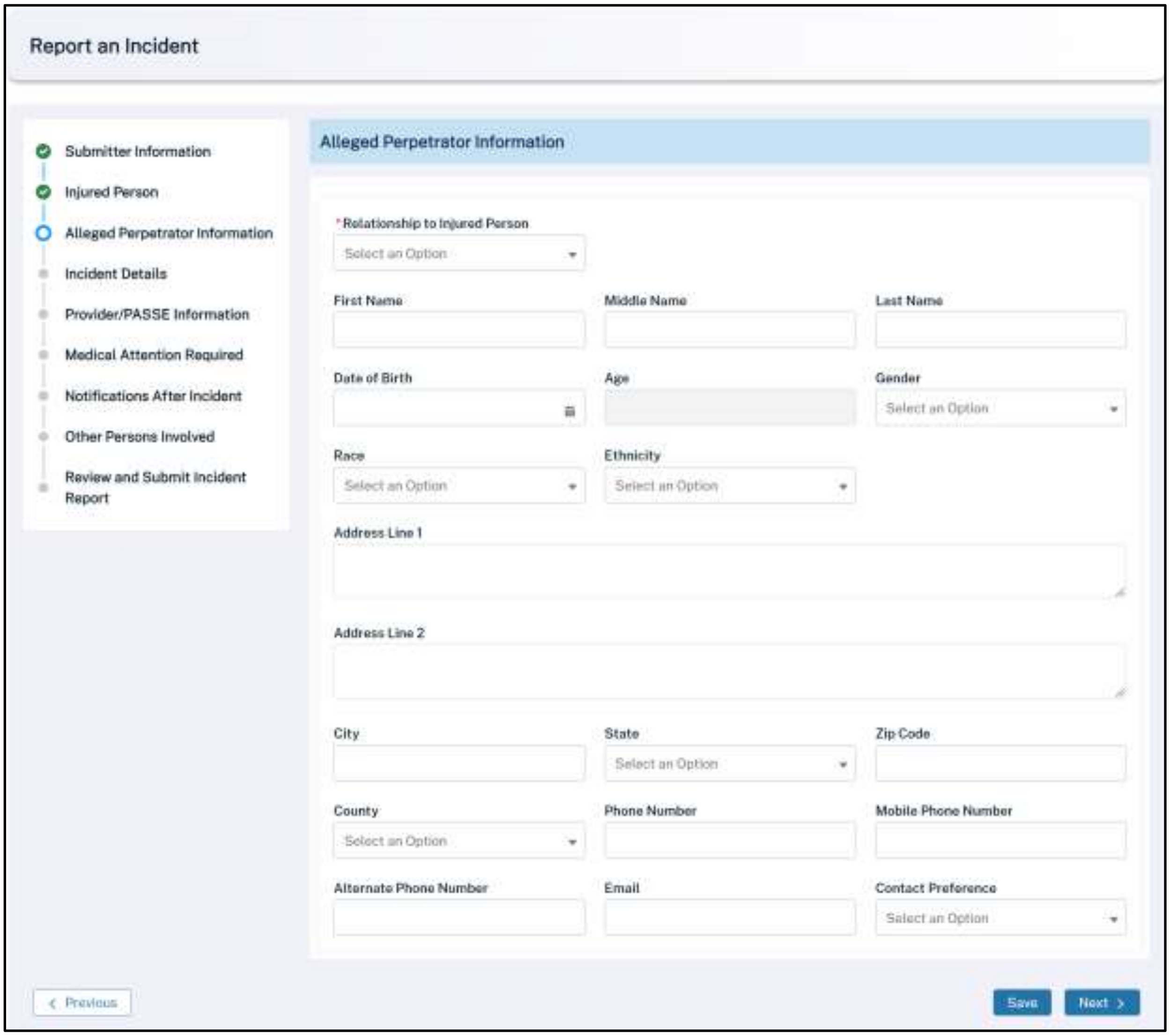
Last Name	Click in the textbox field to enter the injured person’s last name.	Mandatory
Date of Birth	Click the calendar icon to select the injured person’s date of birth.	Mandatory
Age	Auto Calculates	N/A
Gender	Click the dropdown arrow to select the injured person’s gender.	Mandatory
Race	Click the dropdown arrow to select the injured person’s race.	Mandatory
Ethnicity	Click the dropdown arrow to select the injured person’s ethnicity.	Mandatory
Legal Status	Click the dropdown arrow to select the injured person’s legal status.	Mandatory
Address Line 1	Click in the textbox field to enter injured person’s Address Line 1.	Mandatory
Address Line 2	Click in the textbox field to enter injured person’s Address Line 2.	Not Mandatory
City	Click in the textbox field to enter the injured person’s city.	Mandatory
State	Click the drop-down arrow to select the injured person’s state.	Mandatory
Zip Code	Click in the textbox field to enter the injured person’s zip code.	Mandatory
County	Click the drop-down arrow to select the injured person’s county.	Mandatory
Phone Number	Click in the textbox field to enter the injured person’s phone number.	Not Mandatory
Mobile Phone Number	Click in the textbox field to enter a mobile phone number.	Not Mandatory
Alternate Phone Number	Click in the textbox field to enter an alternate phone number.	Not Mandatory
Email	Click in the textbox field to enter the injured person’s email address.	Not Mandatory
IRIS Number	Click in the textbox field to enter the injured person’s IRIS number.	Not Mandatory
Medicaid	Click in the textbox field to enter the injured person’s Medicaid number.	Mandatory
PASSE MEMBER ID#	Click in the textbox field to enter the injured person’s PASSE MEMBER ID number.	Not Mandatory
Contact Preference	Click the drop-down arrow to select the injured person’s contact preference.	Not Mandatory

6.3 Alleged Perpetrator Information

The Alleged Perpetrator Information section of the incident report is mandatory. This section contains fields for contact and personal identification information about the alleged perpetrator.

6.3.1 Screenshot

Depending on the selection for the 'Relationship to Injured Person' field, additional fields, including 'First Name' and 'Last Name,' may become conditionally mandatory.



6.3.1.1 Controls

The following table details the controls that are present through the Alleged Perpetrator Information section. Each control includes a description and control type.

Controls	Description	Control Type
Relationship to Injured Person	Click the dropdown arrow to select the alleged perpetrator's relationship to the injured person.	Mandatory

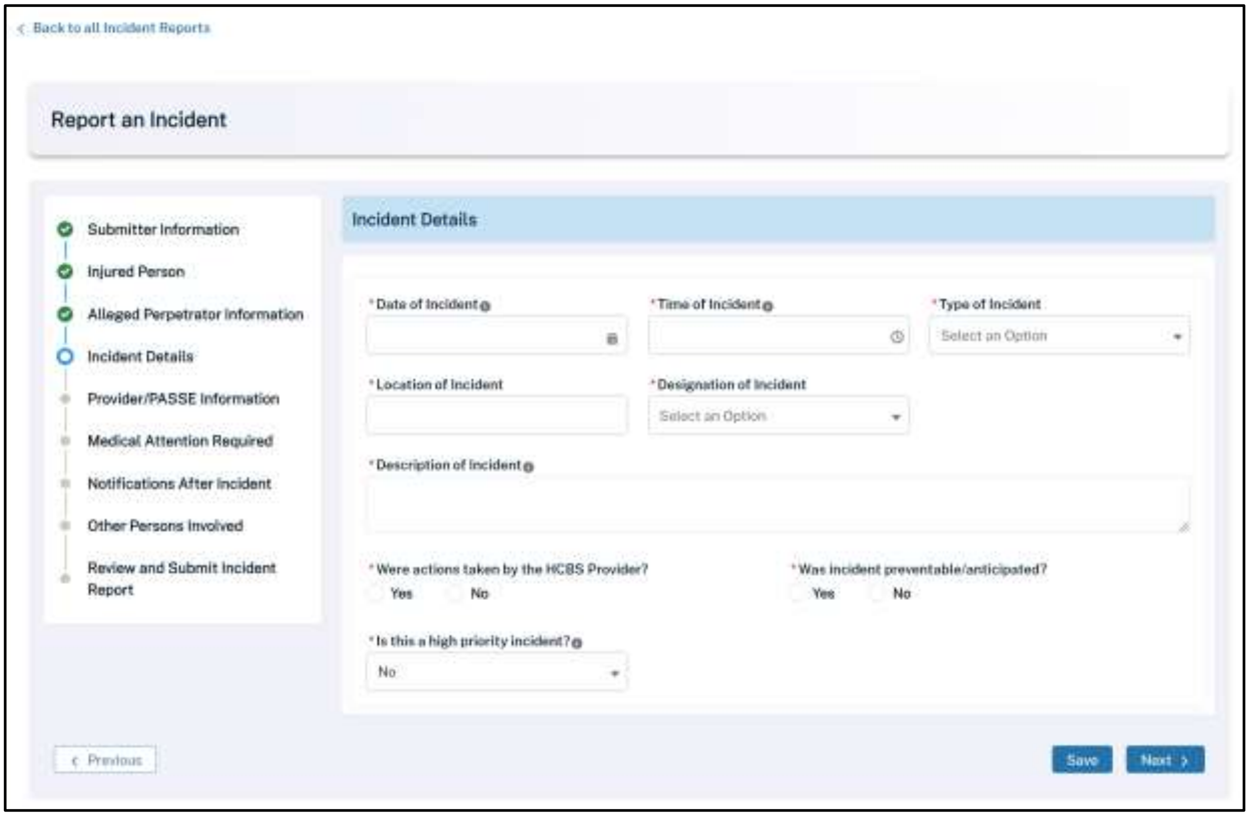
First Name	Click in the textbox field to enter the alleged perpetrator’s first name.	Conditionally Mandatory
Middle Name	Click in the textbox field to enter the alleged perpetrator’s middle name.	Not Mandatory
Last Name	Click in the textbox field to enter the alleged perpetrator’s last name.	Conditionally Mandatory
Date of Birth	Click the calendar icon to select the alleged perpetrator’s date of birth.	Not Mandatory
Age	Auto Calculates	N/A
Gender	Click the drop-down arrow to select the alleged perpetrator’s gender.	Not Mandatory
Race	Click the drop-down arrow to select the alleged perpetrator’s race.	Not Mandatory
Ethnicity	Click the drop-down arrow to select the alleged perpetrator’s ethnicity.	Not Mandatory
Address Line 1	Click in the textbox field to enter the alleged perpetrator’s Address Line 1.	Not Mandatory
Address Line 2	Click in the textbox field to enter the alleged perpetrator’s Address Line 2.	Not Mandatory
City	Click in the textbox field to enter the alleged perpetrator’s city.	Not Mandatory
State	Click the drop-down arrow to select the alleged perpetrator’s state.	Not Mandatory
Zip Code	Click in the textbox field to enter the alleged perpetrator’s zip code.	Not Mandatory
County	Click the drop-down arrow to select the alleged perpetrator’s county.	Not Mandatory
Phone Number	Click in the textbox field to enter the alleged perpetrator’s phone number.	Not Mandatory
Mobile Phone Number	Click in the textbox field to enter a mobile phone number.	Not Mandatory
Alternate Phone Number	Click in the textbox field to enter an alternate phone number.	Not Mandatory
Email	Click in the textbox field to enter the alleged perpetrator’s email address.	Not Mandatory
Contact Preference	Click the drop-down arrow to select the alleged perpetrator’s contact preference.	Not Mandatory

6.4 Incident Details

The Incident Details section of the incident report is mandatory. This section contains fields regarding the date, time, and other pertinent information about the incident.

6.4.1 Screenshot

Depending on the selection for the 'Type of Incident' field, additional fields may populate and become conditionally mandatory.



6.4.1.1 Controls

The following table details the controls that are present through the Incident Details section. Each control includes a description and control type.

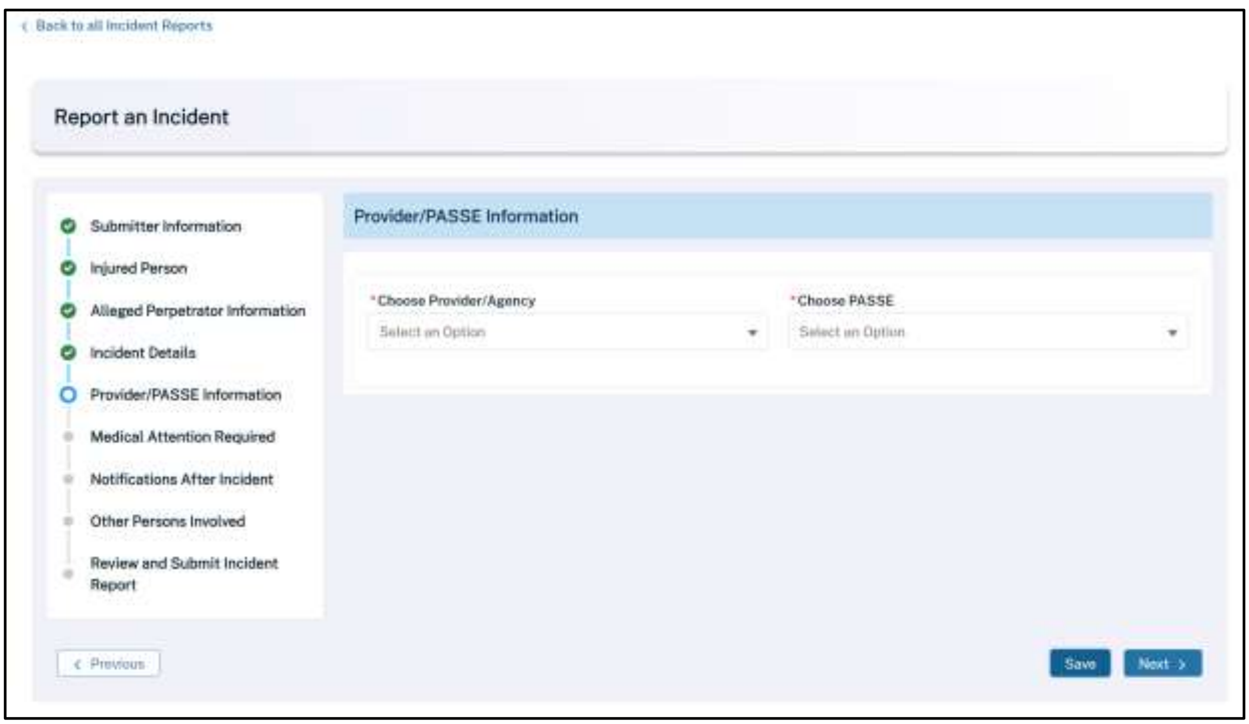
Controls	Description	Control Type
Date of Incident	Click the calendar icon to select the date of the incident.	Mandatory
Time of Incident	Click the clock icon to select the time of the incident.	Mandatory
Type of Incident	Click the drop-down arrow to select the type of incident.	Mandatory
Location of Incident	Click in the textbox field to enter the location of the incident.	Mandatory
Designation of Incident	Click the drop-down arrow to select the designation of the incident.	Mandatory

Description of Incident	Click in the textbox field to enter a description of the incident.	Mandatory
Were actions taken by the HCBS Provider?	Click the radio button to answer 'Yes' or 'No' if actions were taken by the HCBS Provider.	Mandatory
Actions taken by HCBS Provider or Staff	Click the drop-down arrow to select actions taken by an HCBS Provider or Staff.	Conditionally Mandatory
Was incident preventable/ anticipated?	Click the radio button to answer 'Yes' or 'No' if the incident was preventable or anticipated.	Mandatory
How?	Click in the textbox field to enter how the incident was preventable/anticipated.	Conditionally Mandatory
Is this a high priority incident?	Click the drop-down arrow to select if this incident is a high priority.	Mandatory

6.5 Provider/PASSE Information

The Provider/PASSE Information section of the incident report is mandatory. The submitter should select the Provider/PASSE associated with the incident.

6.5.1 Screenshot



6.5.1.1 Controls

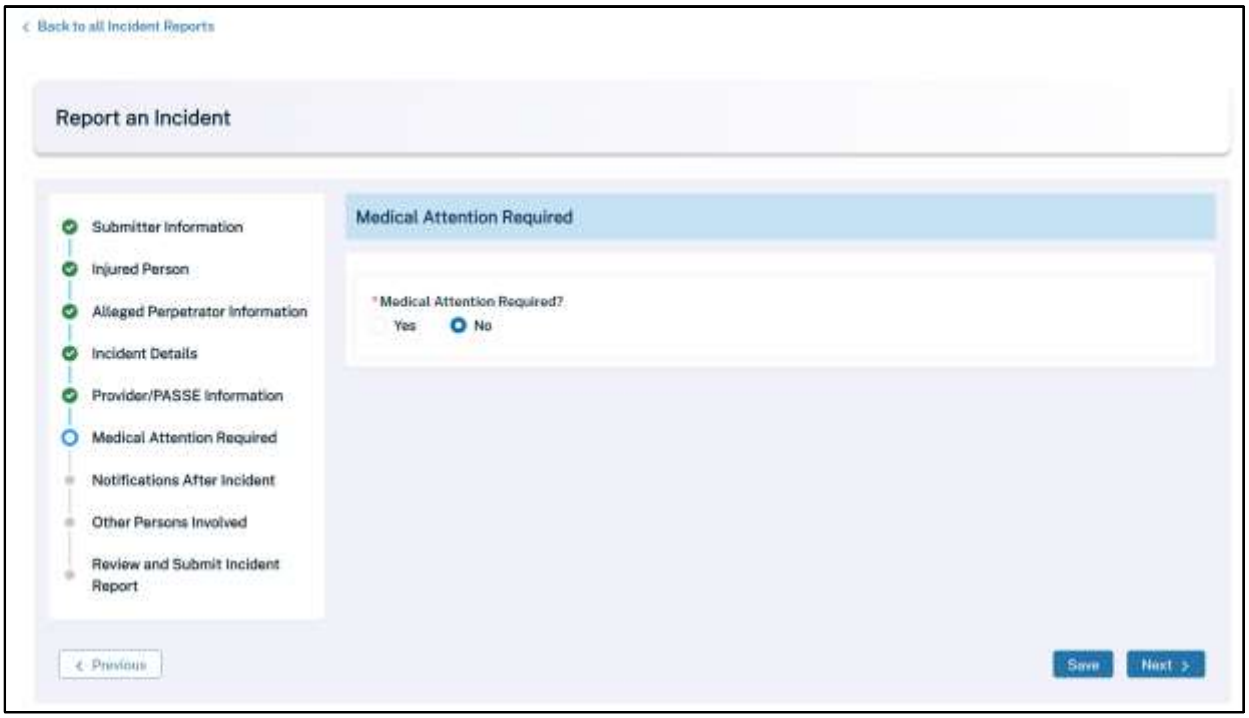
The following table details the controls that are present through the Provider/PASSE Information page. Each control includes a description and control type.

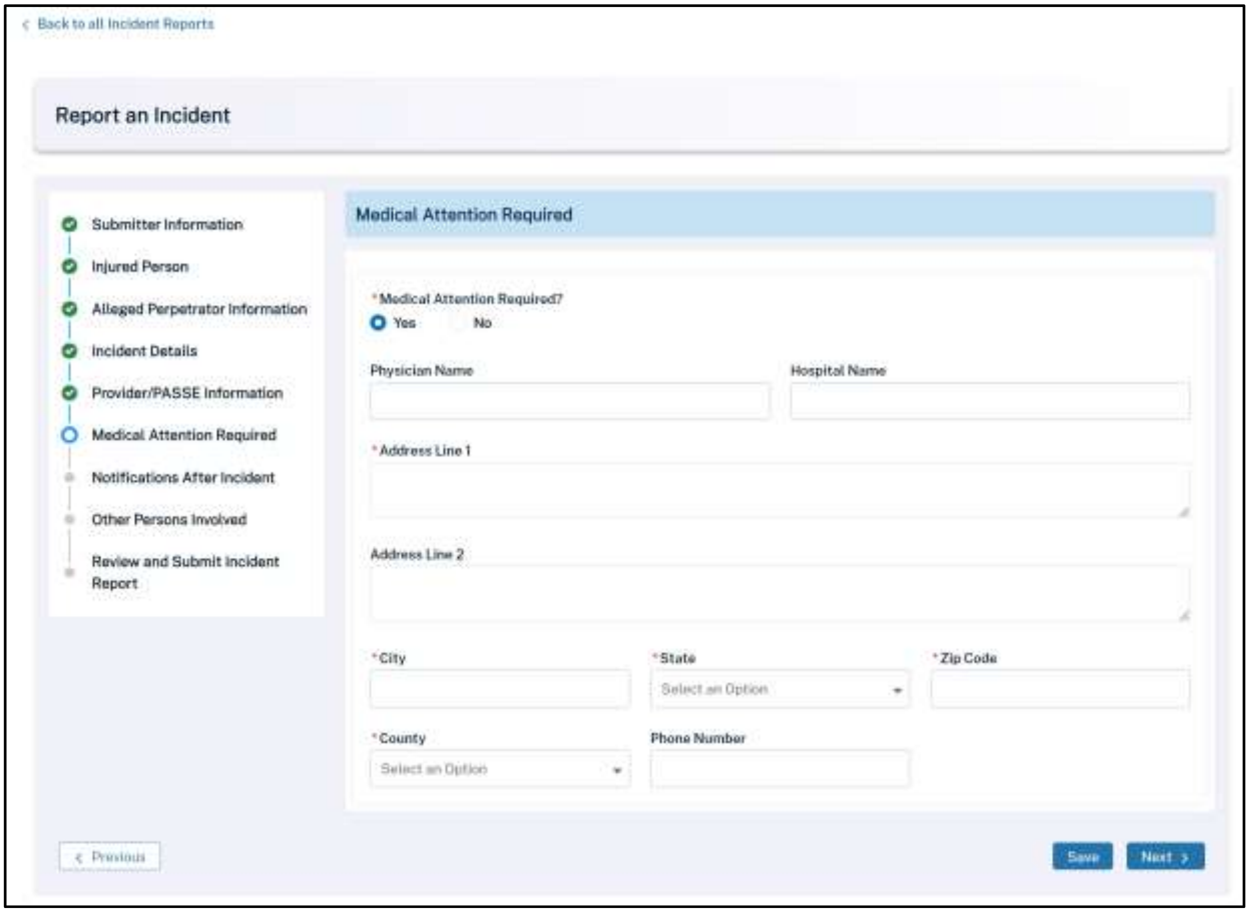
Controls	Description	Control Type
Provider/ Agency	Click the drop-down arrow or type to use completion matching to select the Provider/Agency.	Mandatory
PASSE	Click the drop-down arrow or type to use completion matching to select the PASSE.	Mandatory

6.6 Medical Attention Required

The Medical Attention Required section of the incident report is not mandatory. This section contains fields regarding if medical attention is required for the injured person, including contact information for the physician and hospital involved. If medical attention was required, the submitter must provider *either* the Physician Name or Hospital Name to submit the incident report.

6.6.1 Screenshot





6.6.1.1 Controls

The following table details the controls that are present through the Medical Attention Required page. Each control includes a description and control type.

Controls	Description	Control Type
Medical Attention Required?	Click the radio button to answer 'Yes' or 'No' if medical attention is required.	Mandatory
Physician Name	Click in the textbox field to enter the physician's name.	Not Mandatory
Hospital Name	Click in the textbox field to enter the hospital name.	Not Mandatory
Address Line 1	Click in the textbox field to enter the physician's Address Line 1.	Conditionally Mandatory
Address Line 2	Click in the textbox field to enter the physician's Address Line 2.	Not Mandatory
City	Click in the textbox field to enter the physician's city.	Conditionally Mandatory
State	Click the drop-down arrow the physician's state.	Conditionally Mandatory
Zip Code	Click in the textbox field to enter the physician's zip code.	Conditionally Mandatory

County	Click the drop-down arrow the physician’s county.	Conditionally Mandatory
Phone Number	Click in the textbox field to enter the physician’s phone number.	Not Mandatory

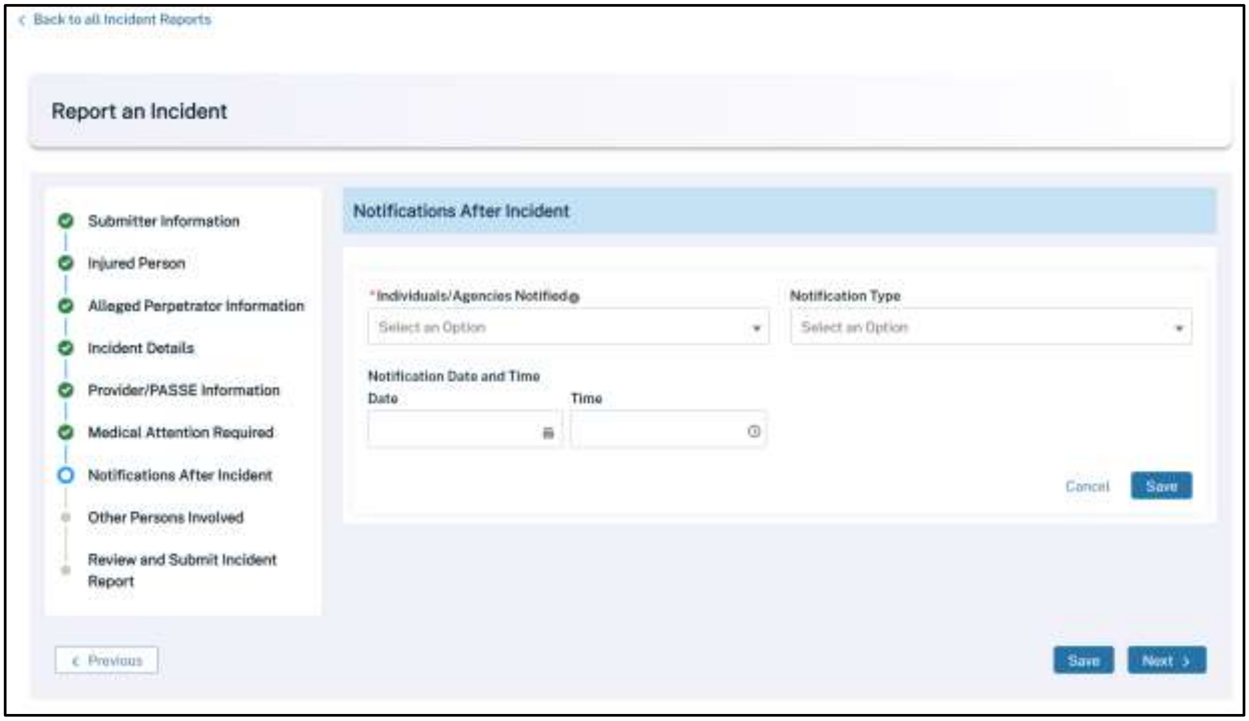
6.7 Notifications After Incident

The Notifications After Incident section of the incident report is mandatory. This section contains a list of fields regarding who is notified of the incident and how they are notified.

6.7.1 Screenshot

A notification may be added by clicking the ‘+ Notification Record’ action button.

After the section is expanded, document the Notifications After Incident information.



6.7.1.1 Controls

The following table details the controls that are present through the Notifications After Incident section. Each control includes a description and control type.

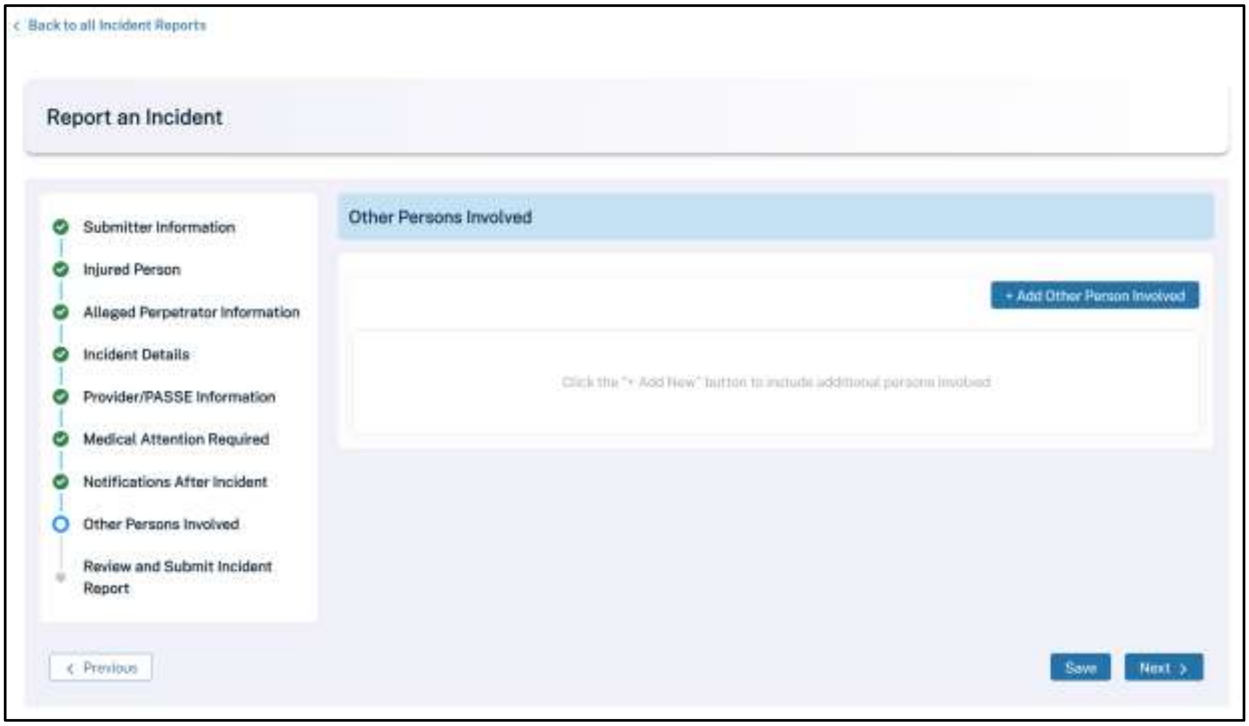
Controls	Description	Control Type
Individuals/Agencies Notified	Click the drop-down arrow to select which agency was notified of the incident.	Mandatory
Notification Type	Click the drop-down arrow to select the preferred notification type.	Conditionally Mandatory
Notification Date	Click the calendar icon to select the notification date.	Conditionally Mandatory
Notification Time	Click the clock icon to select the notification time.	Conditionally Mandatory
User Actions	Description	
+ Add Notification Record	Click the '+ Add Notification Record' action button to generate fields to complete with notification information.	
Cancel	Click the 'Cancel' button to leave the page and not save any information.	
Save	Click the 'Save' button to save the completed information and remain on the page.	

6.8 Other Persons Involved

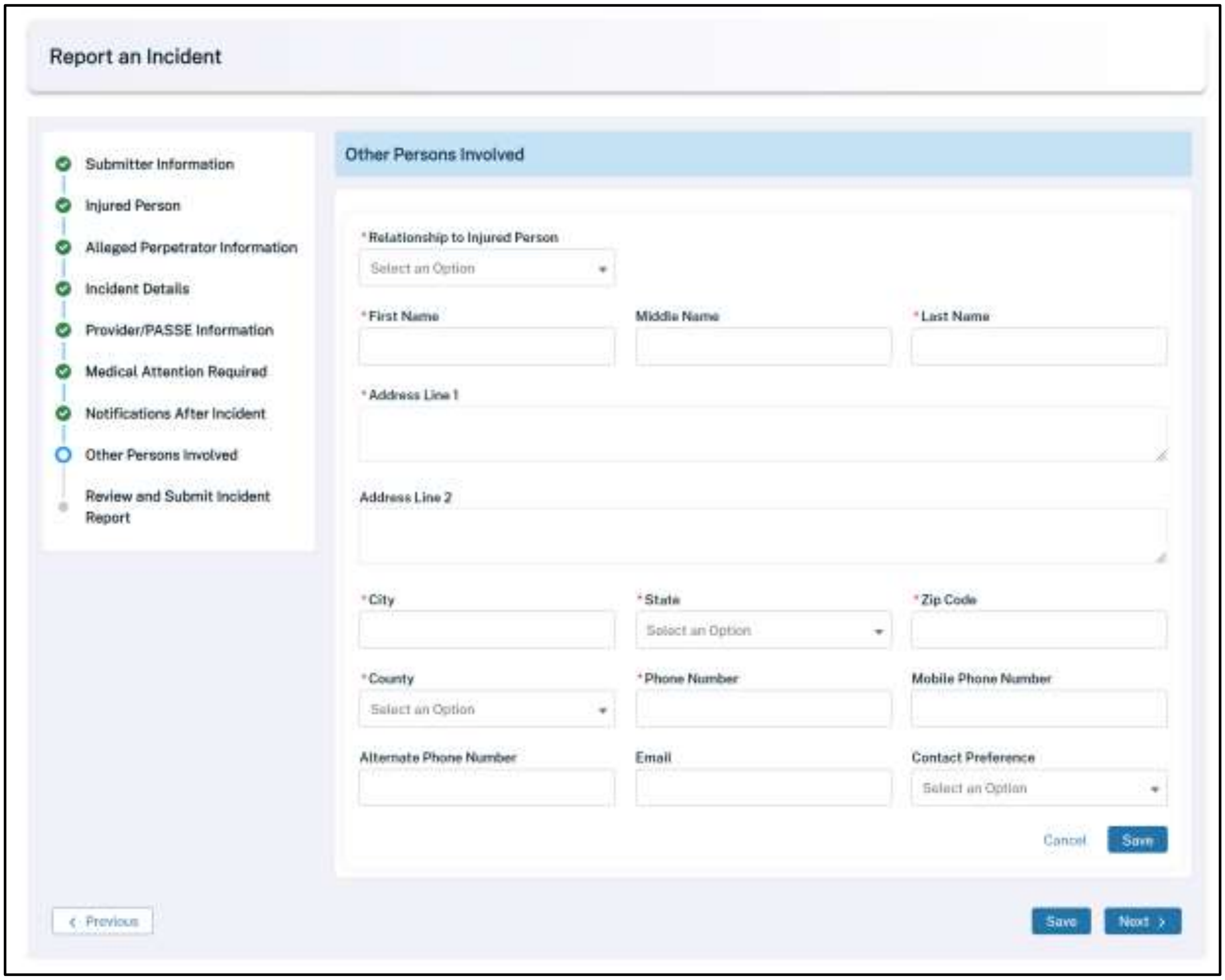
The Other Persons Involved section of the incident report is not mandatory. If choosing to add another person involved to the incident report, information fields will become mandatory.

6.8.1 Screenshots

A person can be added by clicking the '+ Add Other Person Involved' button.



After the section is expanded, document the Other Persons Involved information.



6.8.1.1 Controls & User Actions

The following table details the controls that are present through the Other Persons Involved section. Each control includes a description and control type. Each user action includes a description.

Controls	Description	Control Type
Relationship to Injured Person	Click the drop-down arrow to select the other involved person’s relationship to the injured person.	Mandatory
First Name	Click in the textbox field to enter the other involved person’s first name.	Mandatory
Middle Name	Click in the textbox field to enter the other involved person’s middle name.	Not Mandatory
Last Name	Click in the textbox field to enter the other involved person’s last name.	Mandatory
Address Line 1	Click in the textbox field to enter the other involved person’s Address Line 1.	Mandatory
Address Line 2	Click in the textbox field to enter the other involved person’s Address Line 2.	Not Mandatory

City	Click in the textbox field to enter the other involved person’s city.	Mandatory
State	Click the drop-down arrow to select the other involved person’s state.	Mandatory
Zip Code	Click in the textbox field to enter the other involved person’s zip code.	Mandatory
County	Click the drop-down arrow to select the other involved person’s county.	Mandatory
Phone Number	Click in the textbox field to enter the other involved person’s phone number.	Mandatory
Mobile Phone Number	Click in the textbox field to enter the other involved person’s mobile phone number.	Not Mandatory
Alternate Phone Number	Click in the textbox field to enter the other involved person’s alternate phone number.	Not Mandatory
Email	Click in the textbox field to enter the other involved person’s email address.	Not Mandatory
Contact Preference	Click the drop-down arrow to select the other involved person’s contact preference.	Not Mandatory

User Actions	Description
+ Add Other Person Involved	Click the ‘+ Add Other Person Involved’ button to generate fields to complete with additional involved persons’ information.
Cancel	Click the ‘Cancel’ button to leave the page and not save any information.
Save	Click the ‘Save’ button to save the completed information and remain on the page.

6.9 Review and Submit Incident Report

The Review section of the Incident Report allows the user to review report section entries and edit details, if needed, and ultimately, submit the incident report.

6.9.1 Screenshot

Submitter Information
Injured Person
Alleged Perpetrator Information
Incident Details
Provider/PASSE Information
Medical Attention Required
Notifications After Incident
Other Persons Involved
Review and Submit Incident Report
Submitter Information
Edit
Relationship to Injured Person
First Name
Middle Name
Last Name
Organization
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Address Line 2
City
State
Zip Code
County
Phone Number
Email
Would you like to receive a call back?
Is it OK to leave a message?
Injured Person
Client Type
Date of Birth
Age
Gender
Race
Ethnicity
Legal Status
Mobile Phone Number
Alternate Phone Number
Medicaid
PASSE MEMBER ID
Contact Preference
Alleged Perpetrator Information
Incident Details
Date of Incident
Time of Incident
Type of Incident
Location of Incident
Designation of Incident
Description of Incident
Were actions taken by the HCBS Provider?
Actions taken by HCBS Provider or Staff
Was incident preventable/anticipated?
Is this a high priority incident?
Suspected Cause?
Provider/PASSE Information
Choose Provider/Agency
Choose PASSE
Medical Attention Required
Medical Attention Required?
Notifications After Incident
Other Persons Involved
Submit

6.9.1.1 Controls & User Actions

The following table details the controls that are present through the Review and Submit Incident Report page. Each user action includes a description.

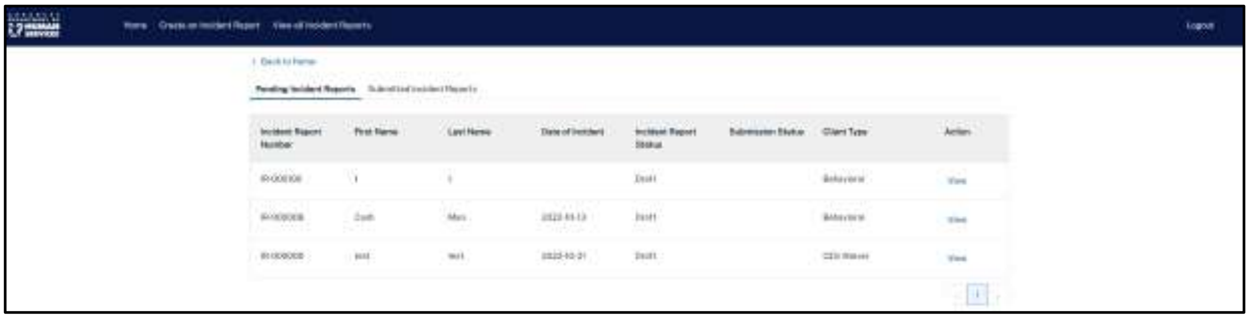
User Actions	Description
Edit	Click the ‘Edit’ pencil icon to edit a section of the incident report.
Previous	Click the ‘Previous’ button to return to the previous section.
Submit	Click the ‘Submit’ button to submit the report.

7 View All Incident Reports

7.1 Pending Incident Reports

Up to 12 pending incident reports will display per page. Users may navigate to view additional pending incident reports by using the page number buttons. Opening a pending incident report allows the user to continue completing the report.

7.1.1 Screenshot



7.1.1.1 User Actions

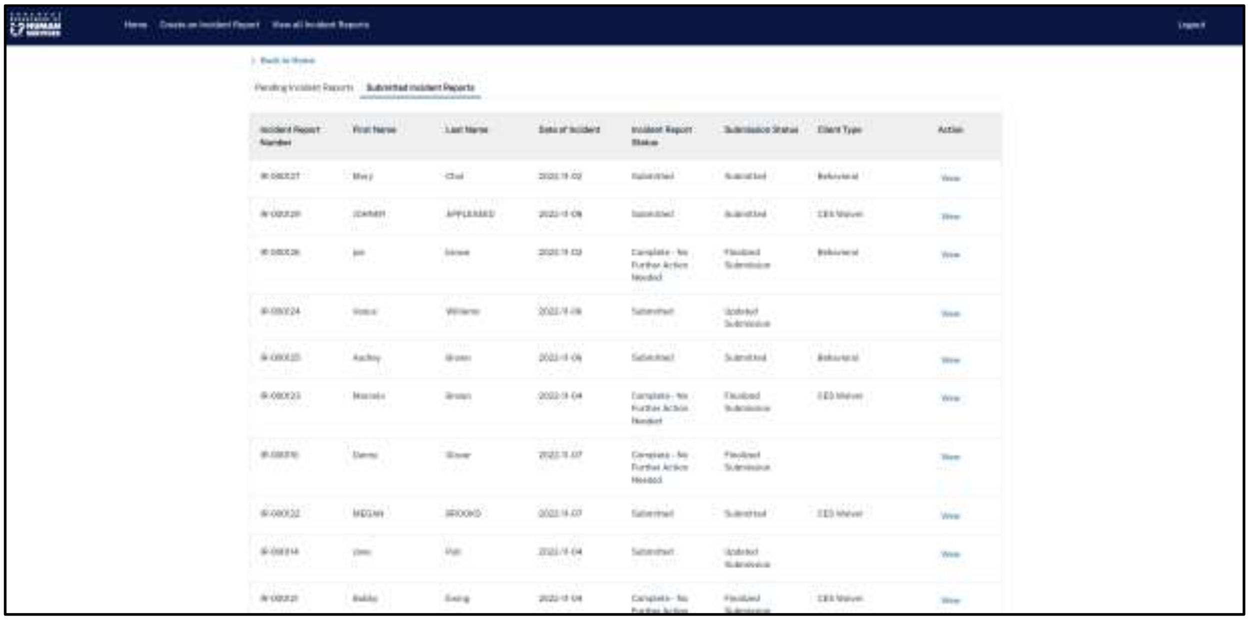
The following table details the user actions that are present through the Pending Incident Reports page. Each user action includes a description.

User Actions	Description
Back to Home	Click the 'Back to Home' button to leave the 'Pending Incident Reports' page and return to the homepage.
View	Click the 'View' hyperlink to navigate to the corresponding in-progress incident report.

7.2 Submitted Incident Reports

Up to 12 submitted incident reports will display per page. Users may navigate to view additional submitted incident reports by using the page number buttons.

7.2.1 Screenshot



7.2.1.1 User Actions

The following table details the user actions that are present through the Submitted Incident Reports page. Each user action includes a description.

User Actions	Description
Back to Home	Click the 'Back to Home' button to leave the 'Submitted Incident Reports' page and return to the homepage.
View	Click the 'View' hyperlink to navigate to the corresponding submitted incident report.

8 Manage Incident Reports

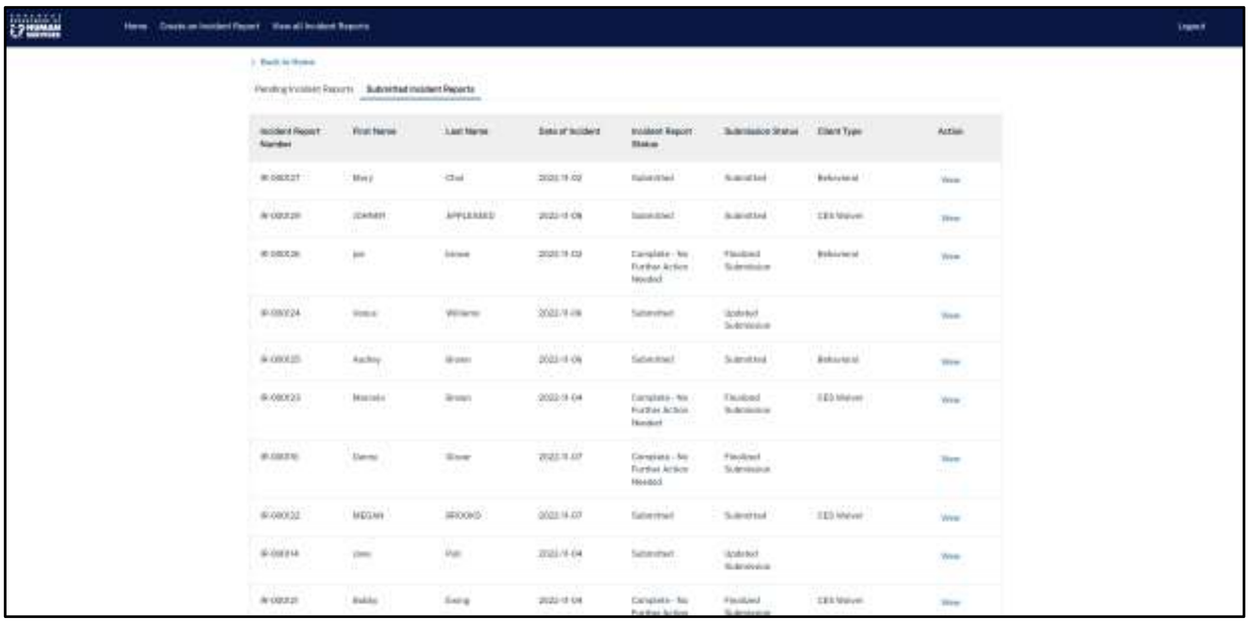
8.1 Overview

After the user has submitted an incident report, the user may view the submitted incident report in read-only format, as well as complete Related Actions.

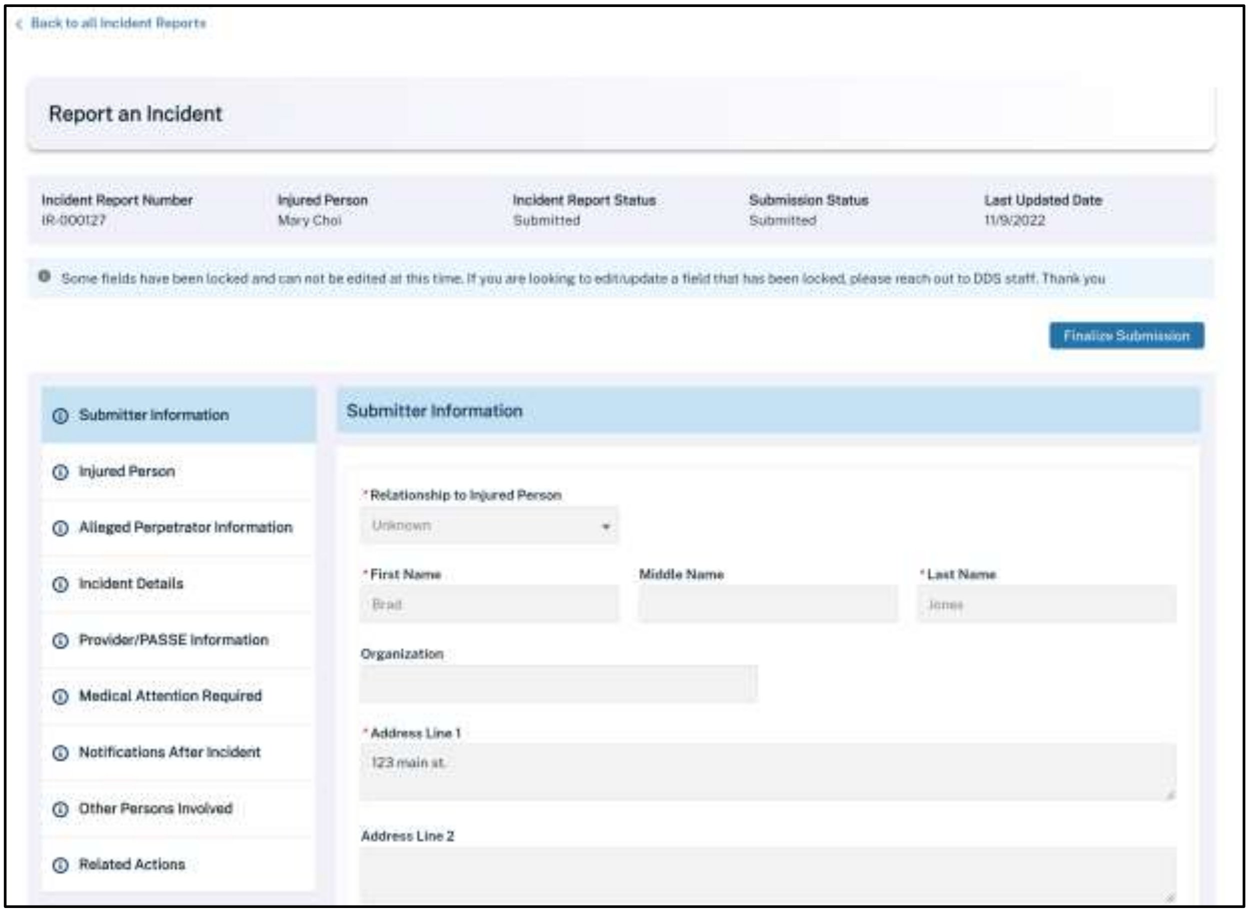
Related Actions populate as a report section on the left navigation bar. A user may submit a follow-up action or view findings by clicking the appropriate Related Actions hyperlink. Multiple actions can occur within each of the two Related Actions.

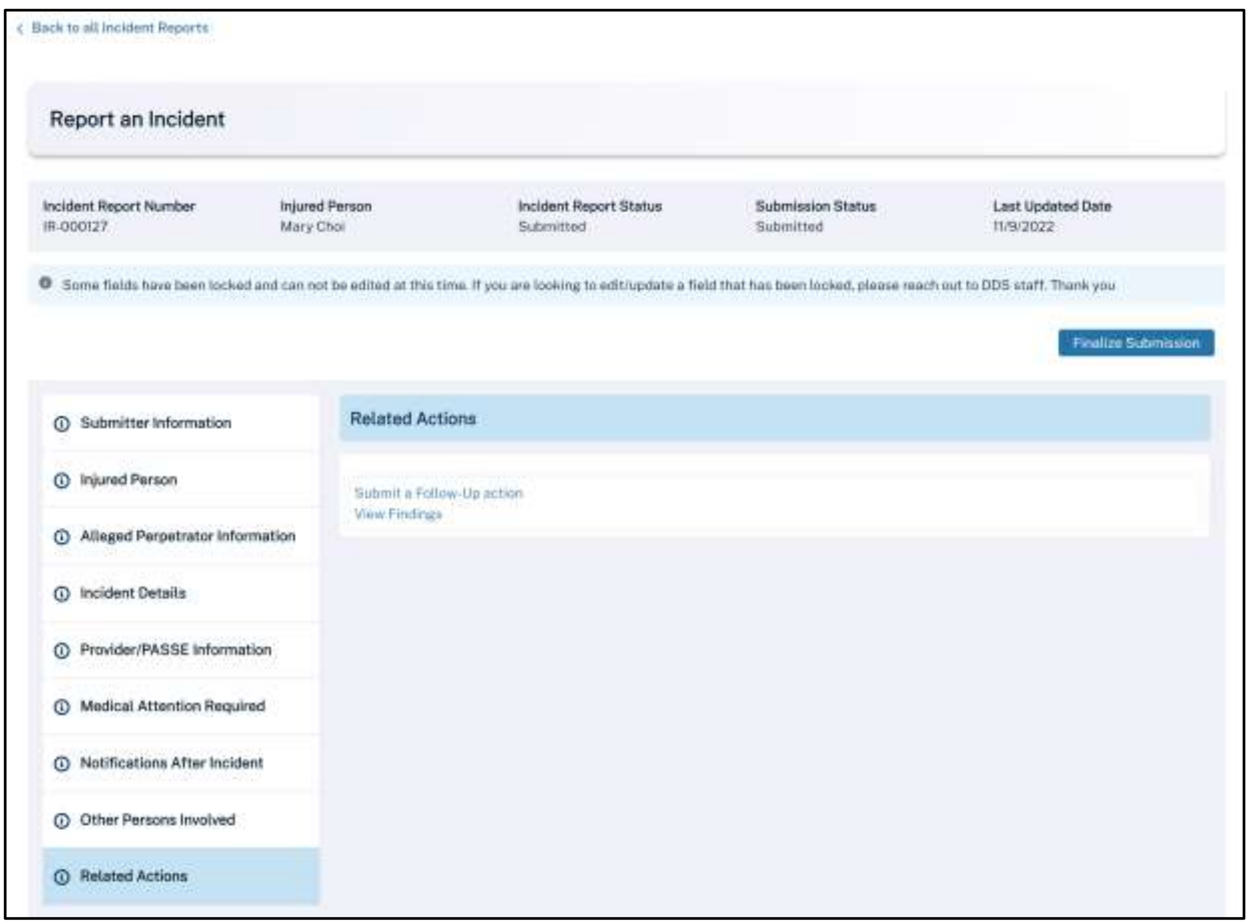
8.1.1 Screenshot

To begin managing an incident report, open the Submitted Incident Reports tab on the 'View All Incident Reports' page.



Upon clicking the 'View' button, the submitted incident report will populate. To view and manage the Related Actions of the incident report, click the 'Related Actions' section on the left navigation bar.


Back to all Incident Reports
Report an Incident
Incident Report Number
IR-000127
Injured Person
Mary Choi
Incident Report Status
Submitted
Submission Status
Submitted
Last Updated Date
11/9/2022
Some fields have been locked and can not be edited at this time. If you are looking to edit/update a field that has been locked, please reach out to DDS staff. Thank you
Finalize Submission
Submitter Information
Injured Person
Alleged Perpetrator Information
Incident Details
Provider/PASSE Information
Medical Attention Required
Notifications After Incident
Other Persons Involved
Related Actions
Submitter Information
*Relationship to Injured Person
Unknown
*First Name
Brad
Middle Name
*Last Name
Jones
Organization
*Address Line 1
123 main st.
Address Line 2


Back to all Incident Reports
Report an Incident
Incident Report Number
IR-000127
Injured Person
Mary Choi
Incident Report Status
Submitted
Submission Status
Submitted
Last Updated Date
11/9/2022
Some fields have been locked and can not be edited at this time. If you are looking to edit/update a field that has been locked, please reach out to DDS staff. Thank you
Finalize Submission
Submitter Information
Injured Person
Alleged Perpetrator Information
Incident Details
Provider/PASSE Information
Medical Attention Required
Notifications After Incident
Other Persons Involved
Related Actions
Related Actions
Submit a Follow-Up action
View Findings

8.1.1.1 User Actions

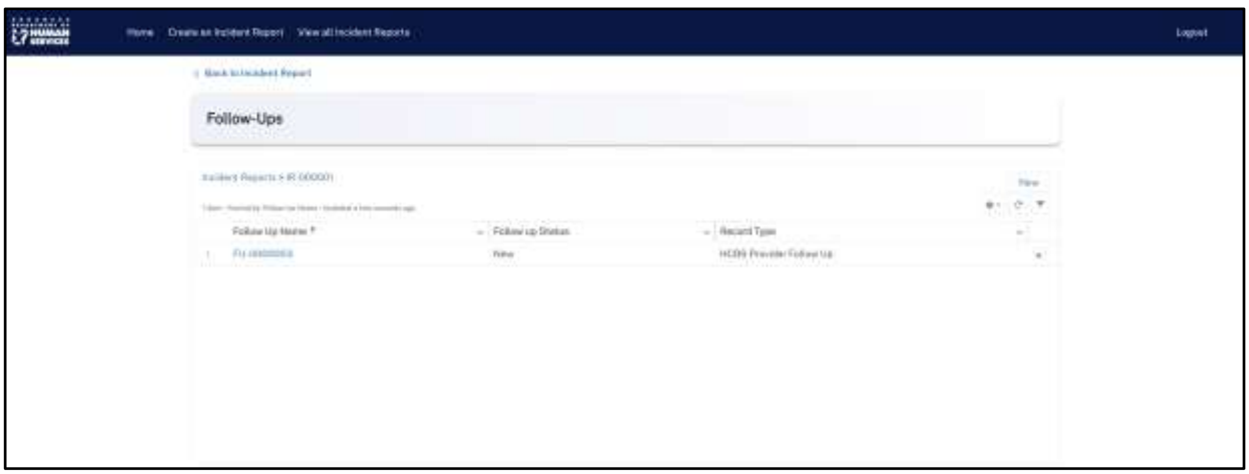
The following table details the user actions that are present through the Submit a Follow-up Action page. Each user action includes a description.

User Actions	Description
Finalize Submission	Click the 'Finalize Submission' action button to submit the incident report and lock all fields from further editing. This is the final incident report submission.
Submit a Follow-Up Action	Click the 'Submit a Follow-Up action' hyperlink to open the Follow-Ups List page and submit a new follow-up for the incident report.
View Findings	Click the 'View Findings' hyperlink to view follow-up action findings for the incident report.
Back to all Incident Reports	Click the 'Back to all Incident Reports' button to leave the incident report and return to Submitted Incident Reports page.

8.2 Follow-Ups List Page

Upon clicking the 'Submit a Follow-up Action' hyperlink, the user is navigated to the Follow-Ups List page. The Follow-Ups List page allows users to view, search, and filter all associated follow-up records. To view a Follow-Up record, click the Follow Up Name hyperlink.

8.2.1 Screenshot



8.2.1.1 Controls & User Actions

The following table details the controls that are present through the Submit a Follow-up Action page. Each control includes a description and control type. Each user action includes a description.

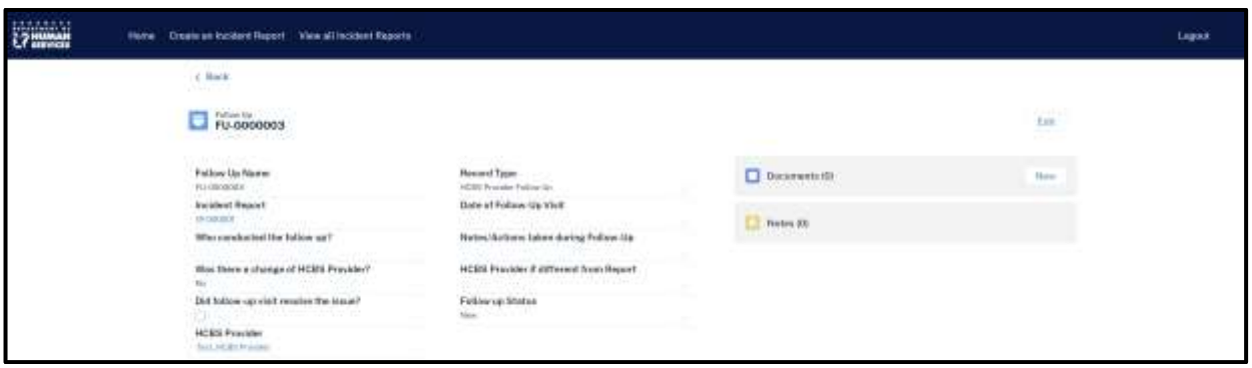
Controls	Description	Control Type

Follow Up Name	Displays a list view format which allows the user to sort in ascending or descending order.	Hyperlink
Follow up Status	Displays a list view format which allows the user to sort in ascending or descending order.	Read Only
Record Type	Displays a list view format which allows the user to sort in ascending or descending order.	Read Only
User Actions	Description	
New	Click the 'New' button to create a new follow-up action.	
Settings	Click the 'Settings' button to display a drop-down list of list view controls.	
Refresh	Click the 'Refresh' button to refresh the list view page.	
Filter	Click the 'Filter' button to select a filter to view certain selected follow-ups.	

8.3 Follow Up Details Page

Upon opening the Follow Up Name hyperlink, a Follow Up Details page will populate, which shows all Follow Up details and information that should be completed. Users may edit the follow up, as well as add new Documents in the Related Links section.

8.3.1 Screenshot



8.3.1.1 Controls & User Actions

The following table details the controls that are present through the Follow-Up Details record page. Each control includes a description and control type. Each user action includes a description.

Controls	Description	Control Type
Follow Up Name	Displays the Follow Up Name.	Pre-Populated
Record Type	Displays the Record Type.	Pre-Populated
Incident Report	Click the 'Incident Report' hyperlink to view the Incident Report.	Hyperlink
Date of Follow-Up Visit	Click the pencil icon to edit the date of follow-up visit.	Editable

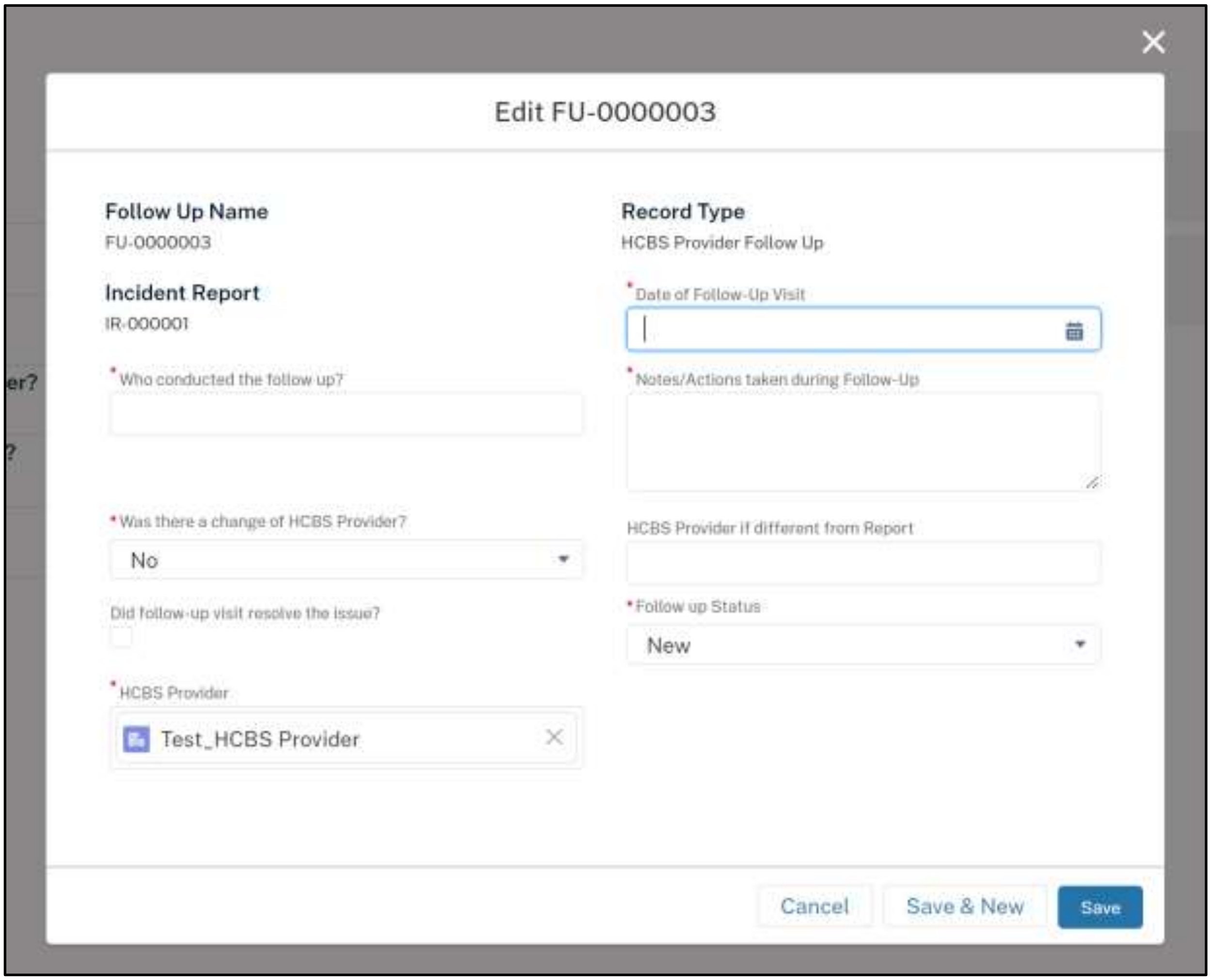
Who conducted the follow up?	Click the pencil icon to edit who conducted the follow up.	Editable
Notes/Actions taken during Follow-Up	Click the pencil icon to edit the notes/actions taken during the follow-up.	Editable
Was there a change of HCBS Provider?	Click the pencil icon to edit if there was a change of HCBS Provider.	Editable
HCBS Provider if different from Report	Click the pencil icon to edit if the HCBS Provider is different from the Report.	Editable
Did follow-up visit resolve the issue?	Click the pencil icon to edit if the follow-up visit did resolve the issue.	Editable
Follow up Status	Click the pencil icon to edit the follow-up status.	Editable
HCBS Provider	Click the pencil icon to edit the HCBS Provider.	Editable
Related Links		
Documents	Click the 'Documents' Related Link hyperlink to open the page containing documents associated with the Follow-up.	Hyperlink
Notes	Click the 'Notes' Related Link hyperlink to open the page containing notes records associated with the Follow-Up.	Hyperlink

User Actions	Description
Edit	Click the 'Edit' button or field pencil icon to edit the record of a specific section of the incident report.
New	Click the 'New' button to create a new document record.
Cancel	Click the 'Cancel' button to leave the page and not save any information.

8.4 New Follow Up: HCBS Provider Follow Up

Upon clicking the 'New' button on the Follow-Up List page *or* the 'Edit' button on a Follow-Up details page, a 'New Follow Up: HCBS Provider Follow Up' pop-up window generates for the user to complete. Upon save, the Follow-Up details page will show all entered information.

8.4.1 Screenshot



8.4.1.1 Controls & User Actions

The following table details the controls that are present through the Submit a Follow-up Action page. Each control includes a description and control type. Each user action includes a description.

Controls	Description	Control Type
Follow Up Name	The 'Follow Up Name' field will system generate upon save.	Pre-Populated
Record Type	Displays the record type.	Pre-Populated
Incident Report	Displays the incident report number.	Pre-Populated
Date of Follow-Up Visit	Click in the calendar icon to select the date of follow-up visit.	Mandatory
Who conducted the follow up?	Click in the textbox field to enter who conducted the follow-up.	Mandatory
Notes/Actions taken during Follow-Up	Click in the textbox field to enter the notes/actions taken during the follow-up.	Mandatory

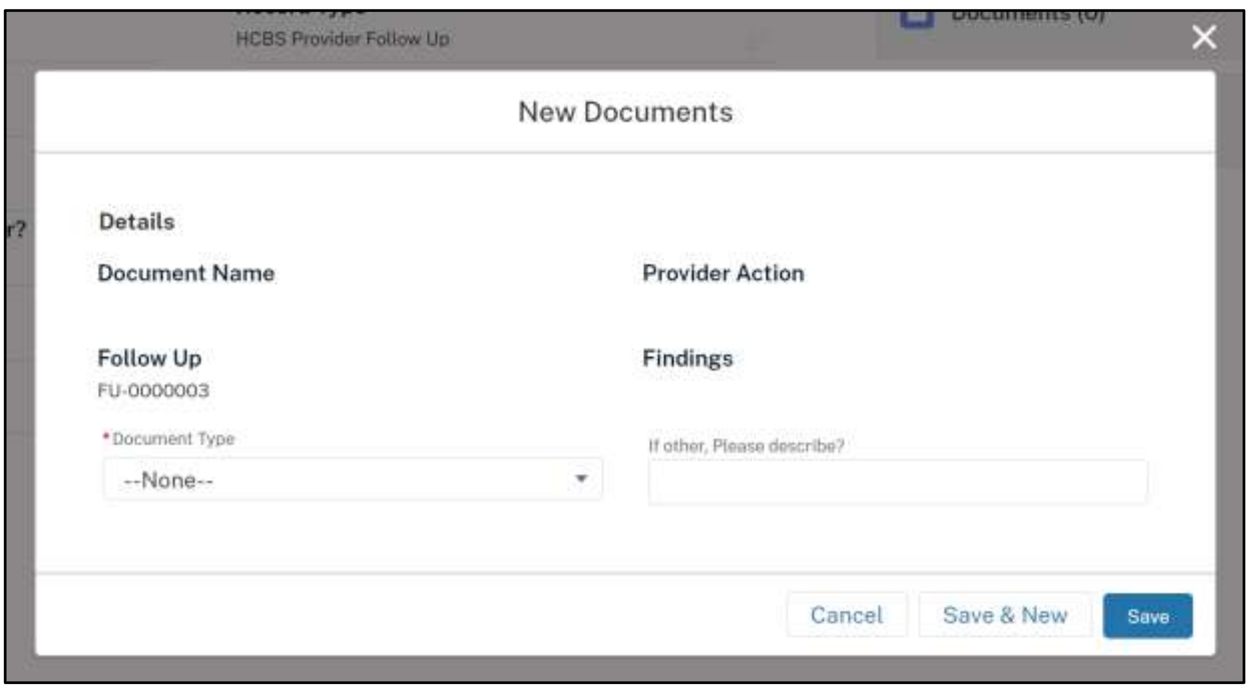
Was there a change of HCBS Provider?	Click the drop-down arrow to select if there was a change of HCBS Provider.	Mandatory
HCBS Provider if different from Report	Click in the textbox field to enter the HCBS Provider if it is different from the report.	Conditionally Mandatory
Did follow-up visit resolve the issue?	Click the checkbox if the follow-up visit resolved the issue.	Not Mandatory
Follow up Status	Click the drop-down arrow to select the follow up status.	Mandatory
HCBS Provider	Click in the search lookup textbox field to select the HCBS Provider.	Mandatory

User Actions	Description
Cancel	Click the 'Cancel' button to leave the page and not save any information.
Save & New	Click the 'Save & New' button to save the information to create a new record.
Save	Click the 'Save' button to save the information.

8.5 Follow Up: Documents

Upon clicking the 'New' button on the Documents Related Link on the Follow Up Details page, a 'New Documents' pop-up window generates for the user to complete.

8.5.1 Screenshot



8.5.1.1 Controls

The following table details the controls that are present through the Follow-Up New Documents pop-up window. Each control includes a description and control type.

Controls	Description	Control Type
Document Name	The system will generate the 'Document Name' when the record is saved.	System Generated
Provider Action	Click in the search lookup textbox field to enter the Provider Action Number.	System Generated
Follow Up	Displays the Follow Up ID.	Auto Populated
Findings	The system will generate the 'Findings ID' when the record is saved.	System Generated
Document Type	Click the dropdown arrow to select the document type.	Mandatory
If other, please describe?	Click in the textbox field to enter the other document type description, if applicable.	Conditionally Mandatory

8.6 Findings List Page

Upon clicking the 'View Findings' hyperlink, the user is navigated to the Findings List page. The Findings List page allows users to view, search, and filter all associated findings records. To view a Findings record, click the Findings Number hyperlink.

8.6.1 Screenshot

8.6.1.1 Controls & User Actions

The following table details the controls that are present through the Findings page. Each control includes a description and control type. Each user action includes a description.

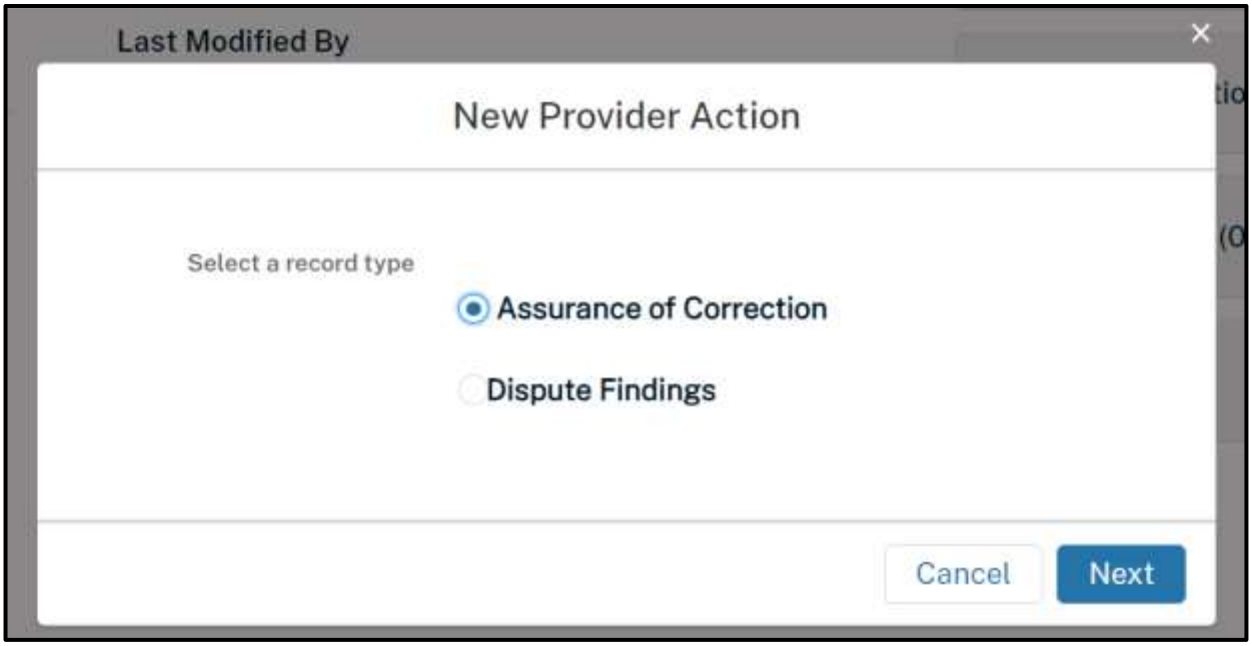
Controls	Description	Control Type
Findings Number	Displays a list view format which allows the user to sort in ascending or descending order.	Hyperlink
Findings Outcome	Displays a list view format which allows the user to sort in ascending or descending order.	Read Only

User Actions	Description
Settings	Click the 'Settings' button to display a drop-down list of list view controls.
Refresh	Click the 'Refresh' button to refresh the list view page.
Filter	Click the 'Filter' button to select a filter to view certain selected Case Files.

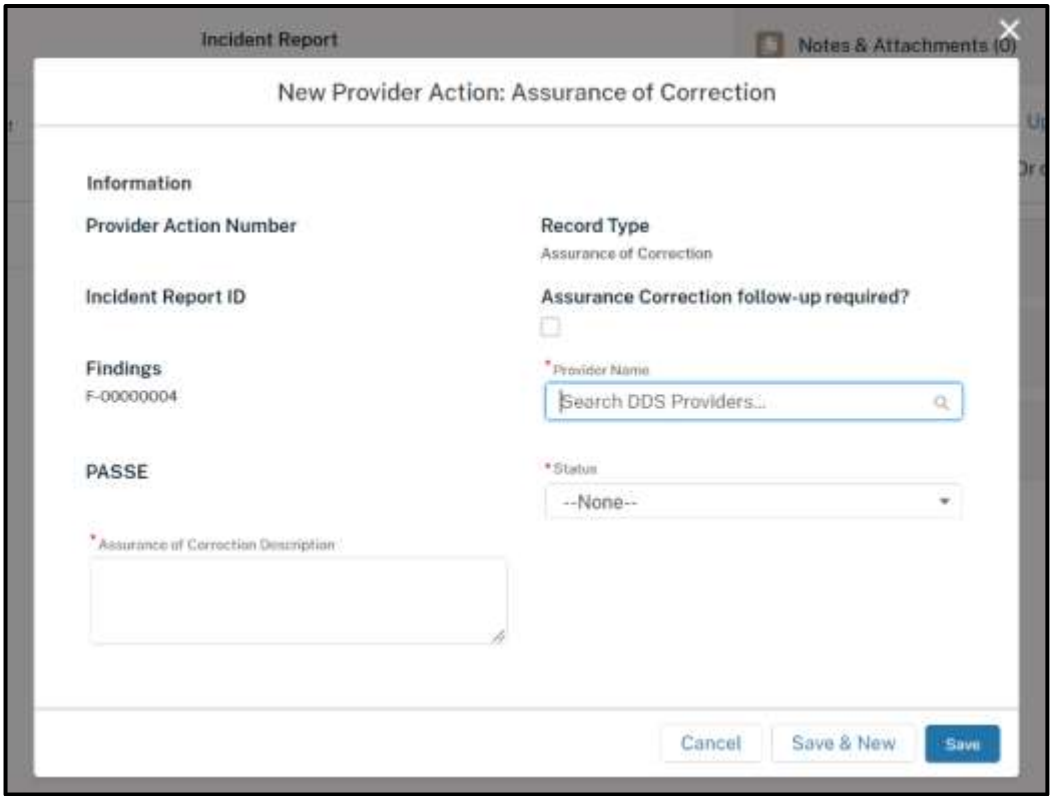
8.7 New Provider Actions: Assurance of Correction

8.7.1 Screenshot

Upon clicking the 'New' button on the Provider Actions Related Link, a 'New Provider Action' pop-up window generates for the user to complete.



After selecting the record type and clicking the 'Next' button, a record-specific pop-up window will appear with fields for the user to document.



8.7.1.1 Controls & User Actions

The following table details the controls that are present through the Findings page. Each control includes a description and control type. Each user action includes a description.

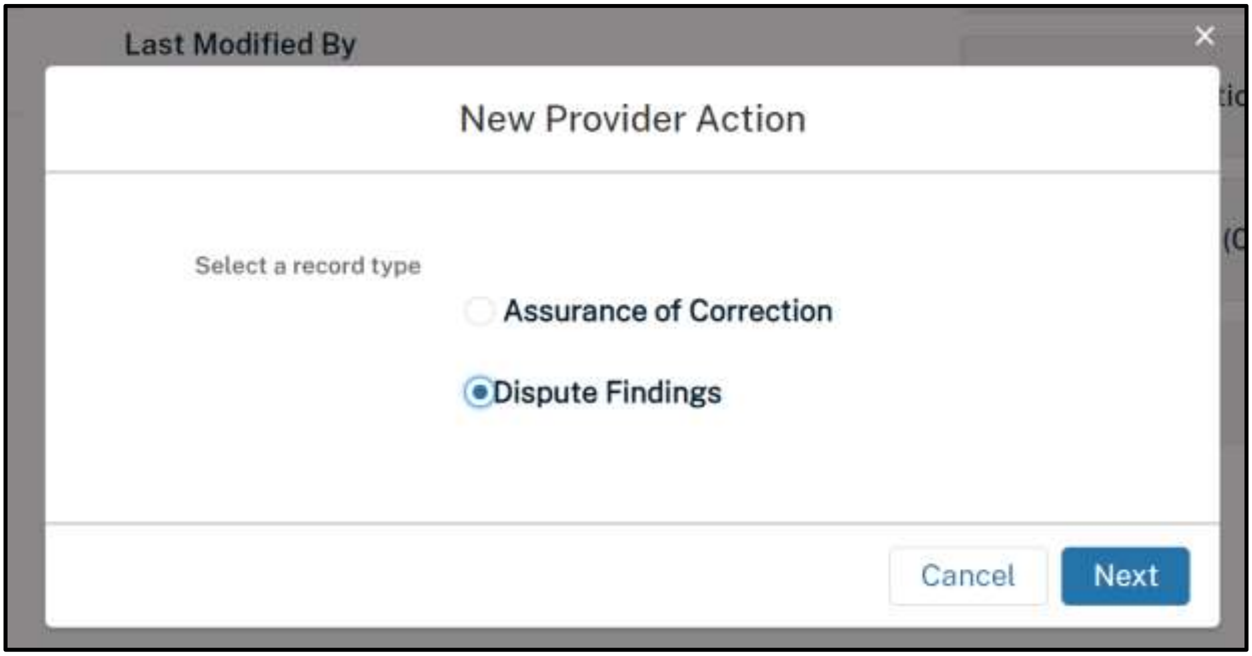
Controls	Description	Control Type
Select a record type	Click the radio button to select which Provider Action record type to create.	Radio Button
Provider Action Number	The system will generate the 'Provider Action Number' when the record is saved.	System Generated
Record Type	Displays the record type.	Pre-Populated
Incident Report ID	The 'Incident Report ID' field will system generate upon save.	System Generated
Follow Up required?	Click the checkbox if assurance correction follow-up is required.	Not Mandatory
Findings	Displays the Findings Name.	Pre-Populated
Provider Name	Click in the search lookup textbox field to enter the Provider Name.	Mandatory
PASSE	The system will generate the 'PASSE' when the record is saved.	System Generated
Status	Click the dropdown arrow to select the Provider Action status.	Mandatory
Assurance of Correction Description	Click in the textbox field to enter the Assurance of Correction description.	Mandatory

User Actions	Description
Next	Click the 'Next 'button to advance to the 'New Provider Action: Assurance of Correction' pop-up window.

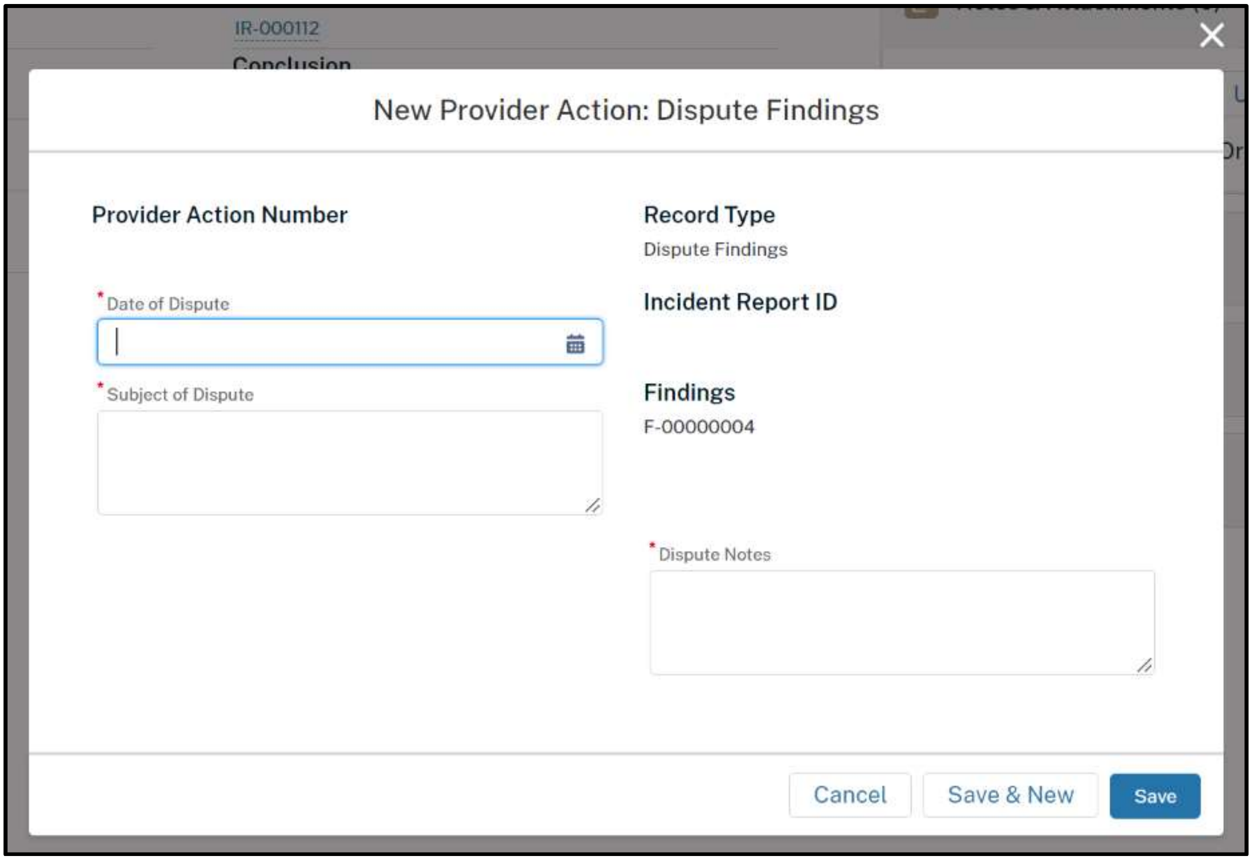
8.8 New Provider Actions: Dispute Findings

8.8.1 Screenshot

Upon clicking the 'New' button on the Provider Actions Related Link, a 'New Provider Action' pop-up window generates for the user to complete.



After selecting the record type and clicking the 'Next' button, a record-specific pop-up window will appear with fields for the user to document.



8.8.1.1 Controls & User Actions

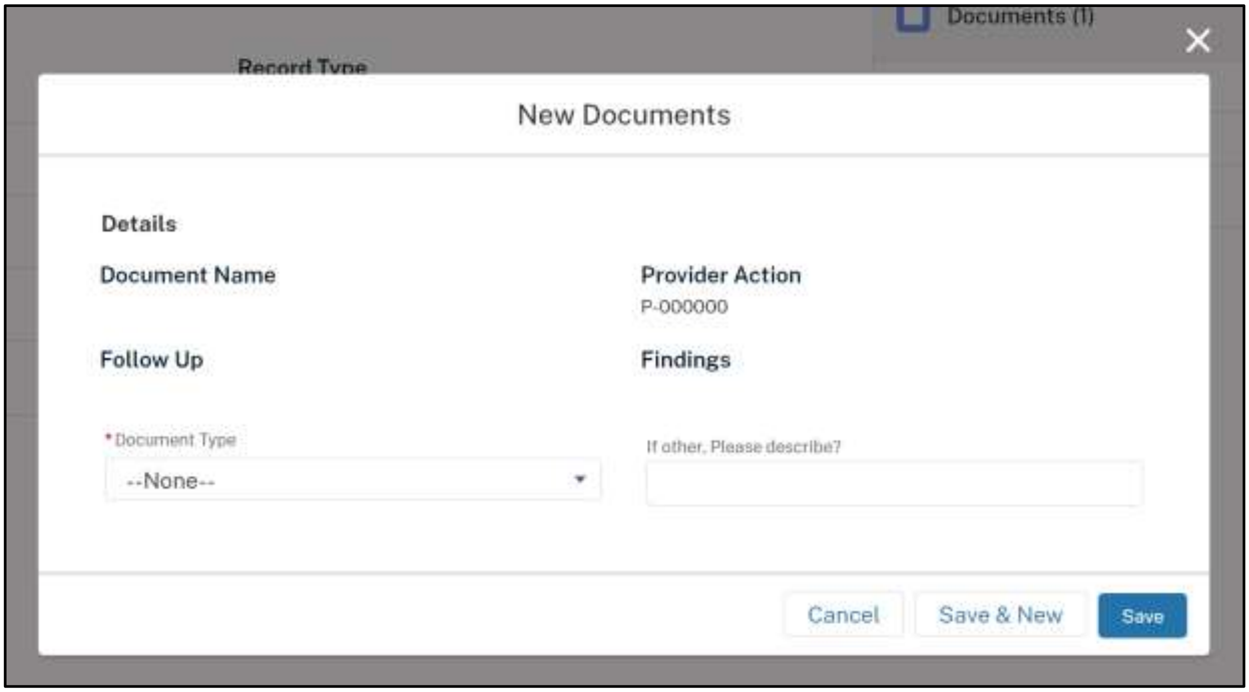
The following table details the controls that are present through the Findings page. Each control includes a description and control type. Each user action includes a description.

Controls	Description	Control Type
Select a record type	Click the radio button to select which Provider Action record type to create.	Radio Buttons
Provider Action Number	The system will generate the 'Provider Action Number' when the record is saved.	System Generated
Record Type	Displays the record type.	Pre-Populated
Date of Dispute	Click in the calendar lookup field to enter the date of dispute.	Mandatory
Incident Report ID	The system will generate the 'Incident Report ID' when the record is saved.	System Generated
Subject of Dispute	Click in the textbox field to enter the subject of dispute.	Mandatory
Findings	Displays the Findings Name.	Pre-Populated
Dispute Notes	Click in the textbox field to enter the dispute notes.	Mandatory
User Actions	Description	
Next	Click the 'Next' button to advance to the 'New Provider Action: Dispute Findings' pop-up window.	

8.9 Findings: Documents

Upon clicking the 'New' button on the Documents Related Link on the Provider Actions Details page, a 'New Documents' pop-up window generates for the user to complete.

8.9.1 Screenshot



8.9.1.1 Controls

The following table details the controls that are present through the Findings page. Each control includes a description and control type.

Controls	Description	Control Type
Document Name	The system will generate the 'Document Name' when the record is saved.	System Generated
Provider Action	Click in the search lookup textbox field to enter the Provider Action Number.	Not Mandatory
Follow Up	Click in the search lookup textbox field to enter the Follow Up Name.	Not Mandatory
Findings	Displays the Findings ID.	Auto Populated
Document Type	Click the dropdown arrow to select the document type.	Mandatory
If other, please describe?	Click in the textbox field to enter the other document type description, if applicable.	Conditionally Mandatory

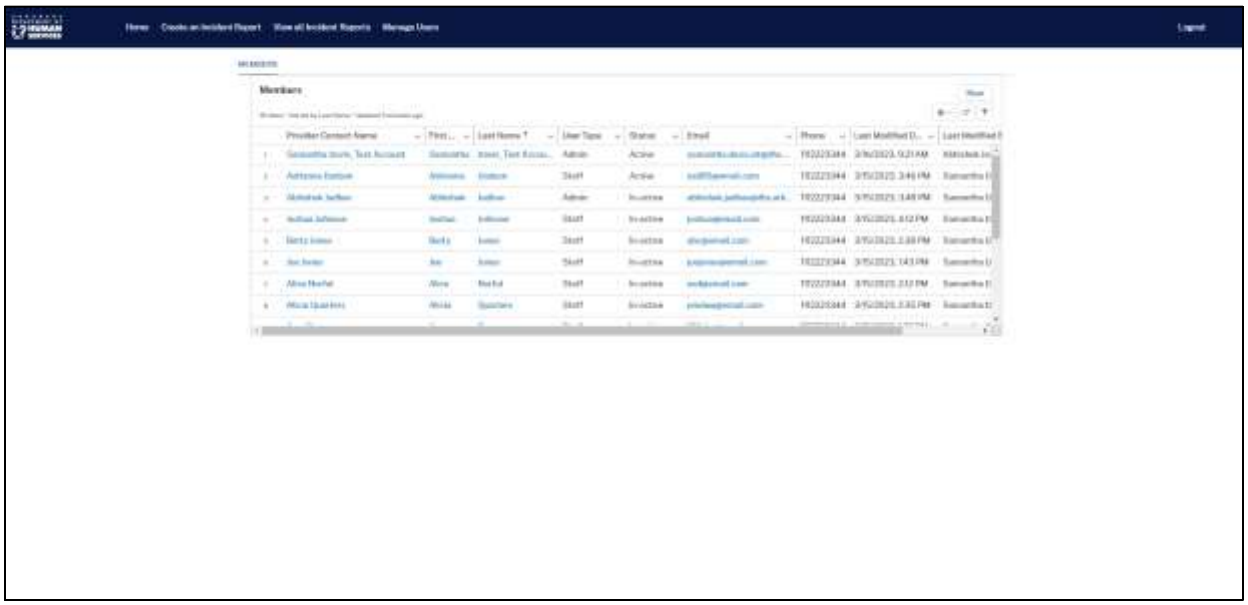
9 Manage Users

9.1 Overview

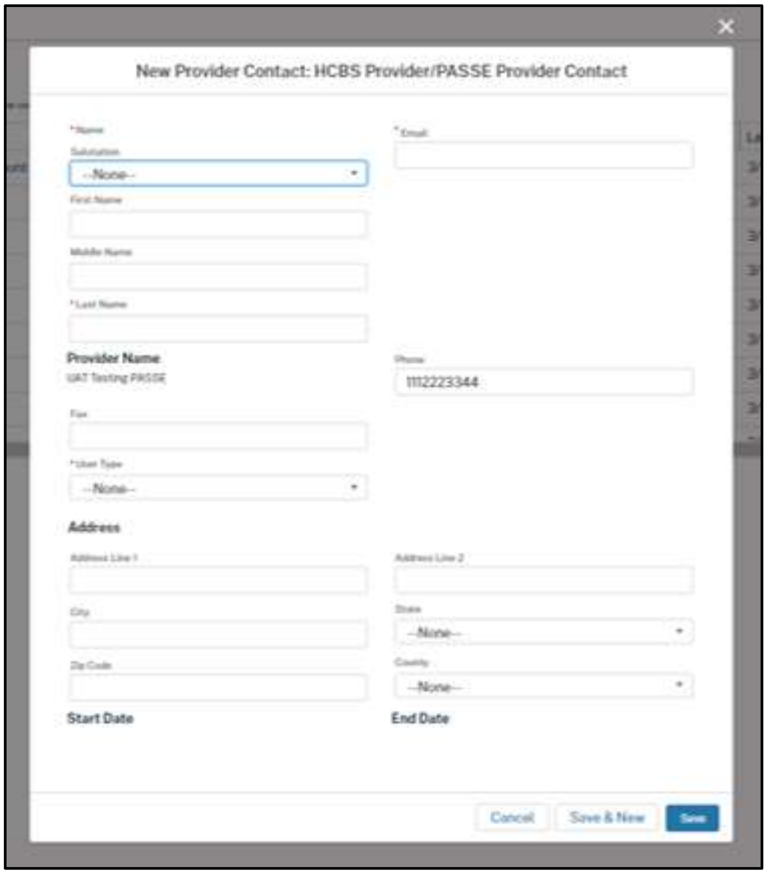
The Provider User may view the list of all Provider Contact name and details associated with their account. It is through the *Manage Users* tab that Provider Admins may edit, and enable or disable the contact user accounts for their staff.

9.1.1 Screenshot

To begin adding a new Provider Contact, click the **NEW** button:



Upon clicking the 'NEW' button, the New Provider Contact window will display.



9.1.1.1 Controls & User Actions

The following table details the user actions that are present through the New Provider Contact page. Each user action includes a description and control type.

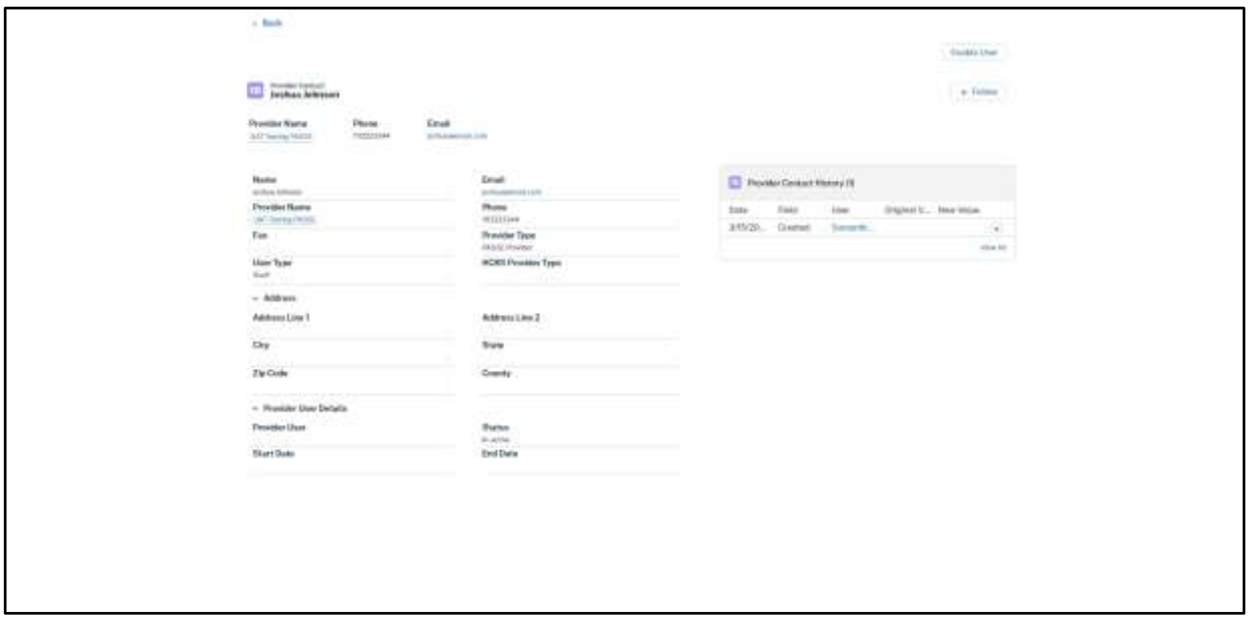
Controls	Description	Control Type
Name		
Salutation	Click the drop-down arrow to select appropriate salutation.	Not Mandatory
First Name	Click in the textbox field to enter first name.	Not Mandatory
Middle Name	Click in the textbox field to enter middle name.	Not Mandatory
Last Name	Click in the textbox field to enter last name.	Mandatory
Email	Click in the textbox field to enter the email address.	Mandatory
Provider Name	System will populate the field.	System-Generated
Phone	Click in the textbox field to enter phone information.	Not Mandatory
Fax	Click in the textbox field to enter fax information.	Not Mandatory
User Type	Click the drop-down arrow to select user type.	Mandatory
Address Line 1	Click in the textbox field to enter the person’s Address Line 1.	Not Mandatory

Address Line 2	Click in the textbox field to enter the person’s Address Line 2.	Not Mandatory
City	Click in the textbox field to enter the city.	Not Mandatory
State	Click the drop-down arrow to select the state.	Not Mandatory
Zip Code	Click in the textbox field to enter the zip code.	Not Mandatory
County	Click the drop-down arrow to select the county.	Not Mandatory
Start Date	System will generate the start date.	System-Generated
End Date	System will generate the start date.	System-Generated

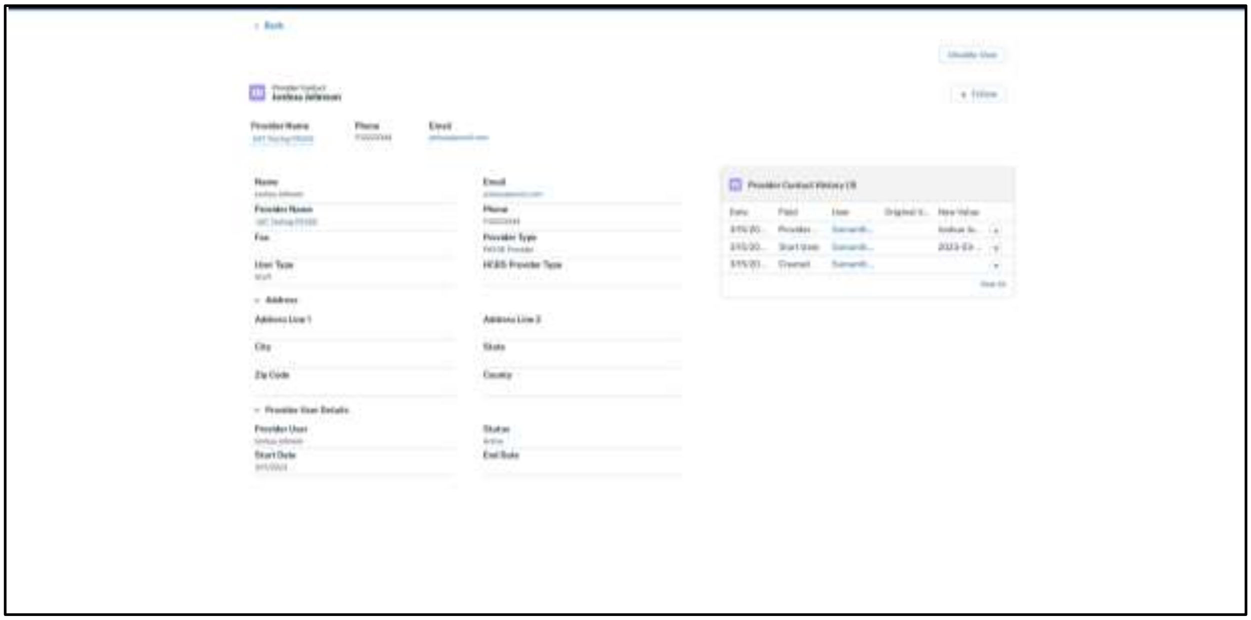
User Actions	Description
Cancel	Click the ‘Cancel’ button to leave the page and not save any information.
Save & New	Click the ‘Save & New’ button to save the information to create a new record.
Save	Click the ‘Save’ button to save the information.

9.1.2 Screenshot

To enable user, click the **Enable User** button:



To disable user, click the **Disable User** button:



9.1.2.1 User Actions

The following table details the user actions that are present on the Provider Contact page. Each user action includes a description and control type.

Controls	Description	Control Type
ENABLE USER	Click the hyperlink button to enable the user.	Hyperlink
DISABLE USER	Click the hyperlink button to disable the user.	Hyperlink