CEI Incident System Instructions

- For Entering Incidents in the Web Portal -

2010-11-08

Reporting Staff

Go to the Web Portal opening screen
(https://incident.ceicmh.org/http://jacv.ceicmhb/incident/)
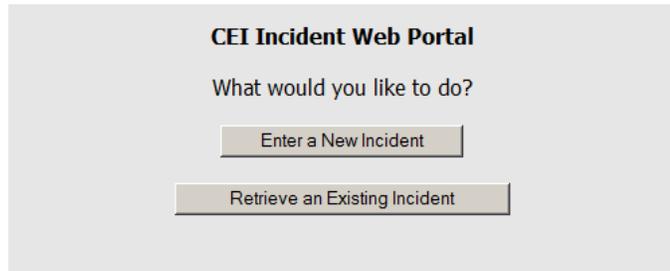
CEI Incident Web Portal

What would you like to do?

[Enter a New Incident]

[Retrieve an Existing Incident]

Select "Enter a New Incident"
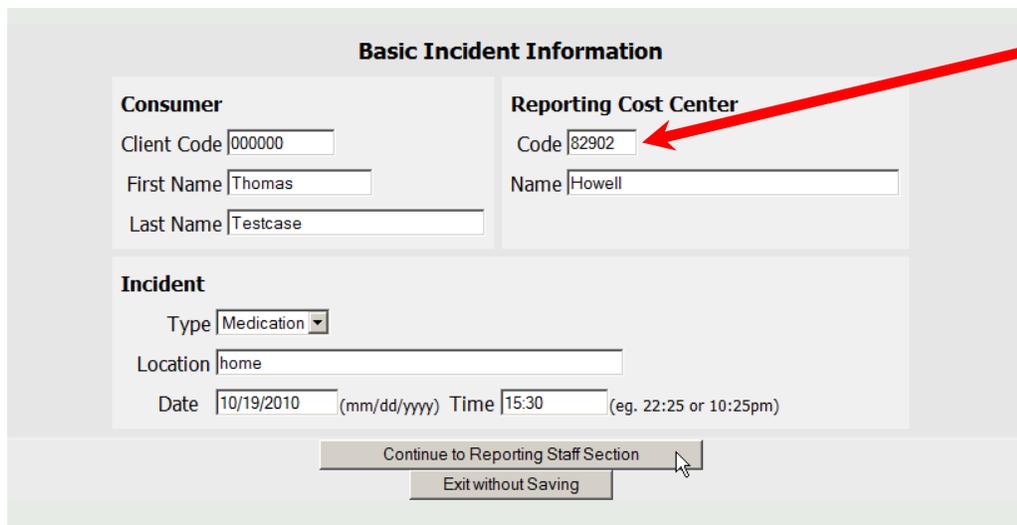
Basic Incident Information

Consumer
Client Code 000000
First Name Thomas
Last Name Testcase

Reporting Cost Center
Code 82902
Name Howell

Incident
Type Medication
Location home
Date 10/19/2010 (mm/dd/yyyy) Time 15:30 (eg. 22:25 or 10:25pm)

[Continue to Reporting Staff Section]
[Exit without Saving]

Complete the basic information, then click the "Continue to Reporting Staff Section" button. (The "Exit without Saving" button will delete any information that has been entered and take the user goes back to Web Portal opening screen.)

The additional information you see next will be determined by the Incident Type (Medication or General).

The Medication form looks like this:

Basic Incident Information

Consumer

Client Code 000000

First Name Thomas

Last Name Testcase

Reporting Cost Center

Code 60103

Name ART

Incident

Type Medication

Location home

Date 10/31/2010 (mm/dd/yyyy) Time 12:12 (eg. 22:25 or 10:25pm)

To be Completed by Reporting Staff

Indicate Medications Involved

Medication(s) in event/error	Med classification e.g., psycho-tropic, pain, etc.	Prescribed # of does each day	# doses affected
Med 1	pain	3	1
Med 2	pain	3	1
Med 3	psychotropic	3	1
Med 4	pshchotropic	3	1
Add more rows			

Med Error

☐ Wrong Person/Medication Administered
☐ Wrong route of Administration
☐ Wrong dosage Administration
☐ Wrong Time/Day
☐ MAR* transcription error
☐ MAR* staff signing error

If any errors were checked above, complete the following:
If pharmacy error, which one
Who was contacted
Were Instructions followed
Med Error Outcome

If instructions were not followed, explain

Missed Meds

☐ Missed Medication
If Med not available, reason
If Med not available, who was contacted
If Med refused, reason
If pharmacy error, which one
Was there a MAR* transcription error
Was there a MAR* staff signing error
Who was contacted
Were instructions followed
Missed Med Outcome

If instructions were not followed, explain

* MAR = Medication Administration Record

☐ Adverse Medication Reaction
What was the outcome

Reporting Staff Signature
(By entering your name you are attesting that information on this form is correct to the best of your knowledge)

Continue to On-Site Supervisor Section
Save Incident and Exit
Exit without Saving

Complete the form.

> If more rows are required for listing Meds, click the Add More Rows button and additional rows will become available.

To be Completed by Reporting Staff

Indicate Medications Involved			
Medication(s) in event/error	Med classification *e.g., psycho-tropic, pain, etc.*	Prescribed # of does each day	# doses affected
Med 1	pain	3	1
Med 2	pain	3	1
Med 3	psychotropic	3	1
Med 4	pshchotropic	3	1
Add more rows			

When a check box is checked, any additional fields below the check box become available for data entry.

The Reporting Staff Signature only requires that you type your name in the box.

Most reporting staff will use the "Save incident and Exit" button which will save the incident and return the user to the receipt page.

The "Exit without Saving" command button returns the user to the opening page and does not save the data entered in the form.

The "Continue to On-Site Supervisor Section" button allows the user to proceed to the next section of the form.

The General Incident form looks like this:

The entire form for Medication incidents (including the On-Site Supervisor Section) looks like this:

Basic Incident Information

Consumer	Reporting Cost Center
Client Code 000000	Code 60103
First Name Thomas	Name AMT
Last Name Testcase	

Incident

Type Medication

Location home

Date 10/31/2010 (mm/dd/yyyy) Time 12:12 (eg. 22:25 or 10:25pm)

To be Completed by Reporting Staff

Indicate Medications Involved

Medication(s) in event/error	Med classification e.g., psycho-tropic, pain, etc.	Prescribed # of does each day	# doses affected
Med 1	pain	3	1
Med 2	pain	3	1
Med 3	Psychotropic	2	1
Med 4	Psychotropic	2	1

Add more rows

Med Error

☑ Wrong Person/Medication Administered
☐ Wrong route of Administration
☐ Wrong dosage Administration
☐ Wrong Time/Day
☐ MAR* transcription error
☐ MAR* staff signing error

If any errors were checked above, complete the following:
- If pharmacy error, which one [ ]
- Who was contacted [ ]
- Were Instructions followed [ ]
- Med Error Outcome [ ]

If instructions were not followed, explain
[   ]

Missed Meds

☐ Missed Medication
- If Med not available, reason [ ]
- If Med not available, who was contacted [ ]
- If Med refused, reason [ ]
- If pharmacy error, which one [ ]
- Was there a MAR* transcription error [ ]
- Was there a MAR* staff signing error [ ]
- Who was contacted [ ]
- Were instructions followed [ ]
- Missed Med Outcome [ ]

If instructions were not followed, explain
[   ]

* MAR = Medication Administration Record

☐ Adverse Medication Reaction
What was the outcome [ ]

Reporting Staff Signature John

(By entering your name you are attesting that information on this form is correct to the best of your knowledge)

To be Completed by On-Site Supervising Staff

Notifications
Was Guardian Notified [ ]
Others who should be informed of this event
- Case Manager [ ]
- Nurse [ ]
- Doctor [ ]
- Other [ ]

On-Site responsible staff comments
[   ]

On-Site responsible staff Signature [ ]   Signature Date [ ]

(By entering your name you are attesting that information on this form is correct to the best of your knowledge)

Save Incident and Exit

Exit without Saving

The entire form for General Incidents (including the On-Site Supervisor Section) looks like this:

On-Site Supervising Staff

On-Site Supervising staff will review and complete the form. When they have completed this, they should enter their name and the date. (Retrieving an incident that Reporting Staff have entered is in the last section of this document.)

The On-Site Supervising staff signature just requires the user to type their name.

The "Save Incident and Exit" button will save all the information entered by the on-site supervising staff and will take them to the receipt page.

The On Site supervisor section of the General Incident form has more fields to be completed, but the command buttons at the bottom of each screen work exactly as they do on the Medication Incident form.

To be Completed by On-Site Supervising Staff
Check all that apply

Behavioral Events

☐ Death

☐ Arrest

☐ Missing Recipient

☐ Choking
    Outcome [▼]

☐ Exposure to blood/bodily Fluids
    Outcome [▼]

☐ Emergency Care
    Cause [▼]
    Outcome [▼]

☐ Other
    [ ]

☐ Serious Aggressive Event
Intervention Required
☐ NETO ☐ Search/Seizure ☐ Physical
Intervention Outcome [▼]
Behavior Tx Plan [▼]

☐ Serious Property Damage
Intervention Required
☐ NETO ☐ Search/Seizure ☐ Physical
Intervention Outcome [▼]
Behavior Tx Plan [▼]

☐ Serious Self Injury
Intervention Required
☐ NETO ☐ Search/Seizure ☐ Physical
Intervention Outcome [▼]
Behavior Tx Plan [▼]

Notifications
Was Guardian Notified [Yes ▼]
Others who should be informed of this event
Case Manager [William Smith]
Nurse [ ]
Doctor [ ]
Other [ ]

On-Site responsible staff comments
[ ]

On-Site responsible staff Signature   Signature Date
[Wilbur H. Brown]   [10/19/2010]
(By entering your name you are attesting that information on this form is correct to the best of your knowledge)

[Save Incident and Exit]
[Exit without Saving]

Receipt Page

Whenever a user exits from a saved incident, they are taken to a receipt page and the pass code for the incident is displayed.

Incident Acknowledgment

Thank you for submitting this incident. This information will be available for up to 30 days from 11/4/2010 for On-Site Supervising Staff Review.

Important Information

Client Code: 000000

Pass Code: 7yucze

Save this information
It is needed to view this incident again

[Enter a New Incident]

[Retrive an Existsing Incident]

It will be important for Reporting Staff to note the Client Code and the Pass Code so that the On-Site Supervising staff can complete the incident form. (The Pass code is generated by the system and is necessary to maintain client confidentiality.)

Retrieve an Incident

CEI Incident Web Portal

What would you like to do?

Enter a New Incident
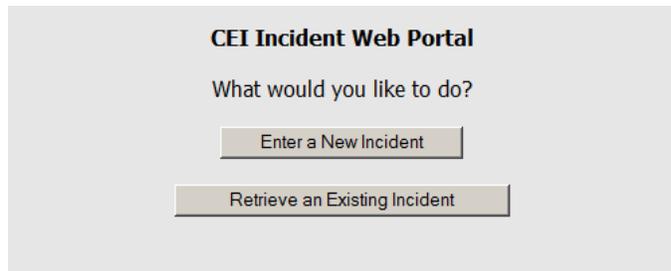
Retrieve an Existing Incident

Go to the Web Portal and select "Retrieve an Existing Incident"
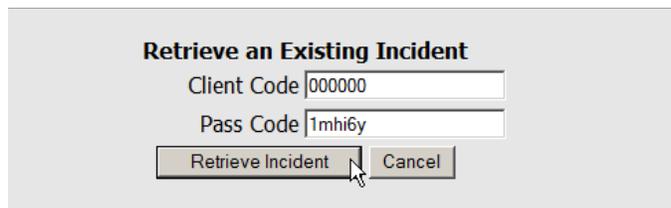
Retrieve an Existing Incident

Client Code 000000

Pass Code 1mhi6y

Retrieve Incident   Cancel

Enter the Client Code and Pass Code, then click "Retrieve Incident"