

The Office of Developmental Programs

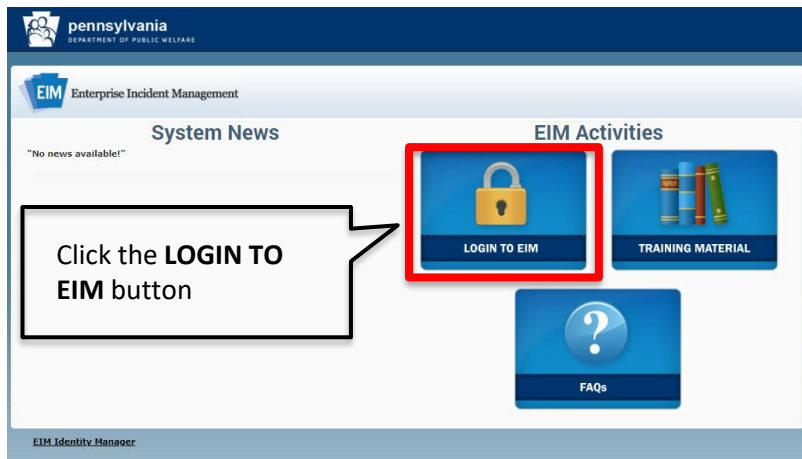
Using the Incident Management Overview Dashboard to Assess Performance Based Contracting Measures RM-IM.01.2, .01.3, and .01.4

This resource will review:

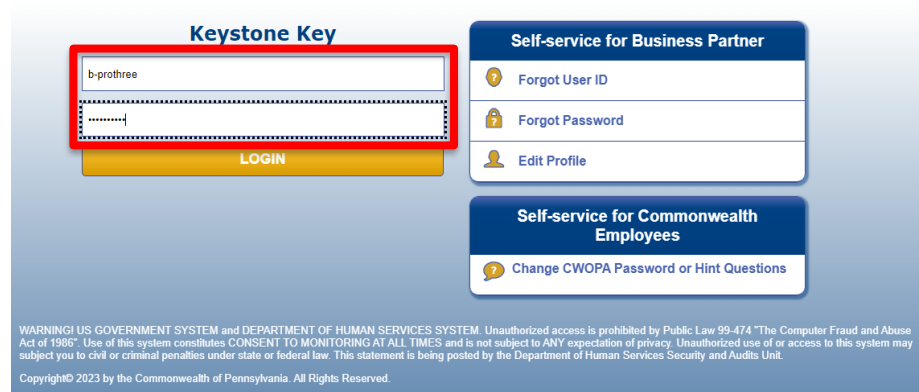
- ✓ *Accessing the Incident Reporting Overview Dashboard*
- ✓ *Dashboard functions that can be used to assess Performance Based Contracting (PBC) measures RM-IM.01.2, .01.3, and .01.4*
 - ✓ *Filters*
 - ✓ *Incidents with Extensions Key Performance Indicator (KPI)*
 - ✓ *First Section and Final Section Doughnut Charts*
- ✓ *Descriptions of Incident First Section Submission, Finalized/Finalization, and Closed*
- ✓ *Step by step instructions that demonstrate how to use the Dashboard to assess PBC measures RM-IM.01.2, .01.3, and .01.4*
- ✓ *Reminders and Considerations*

How to Access and Locate

Navigate to the Enterprise Incident Management (EIM) login screen. Click LOGIN TO EIM.



Enter your login ID and Password, then click the LOGIN button.



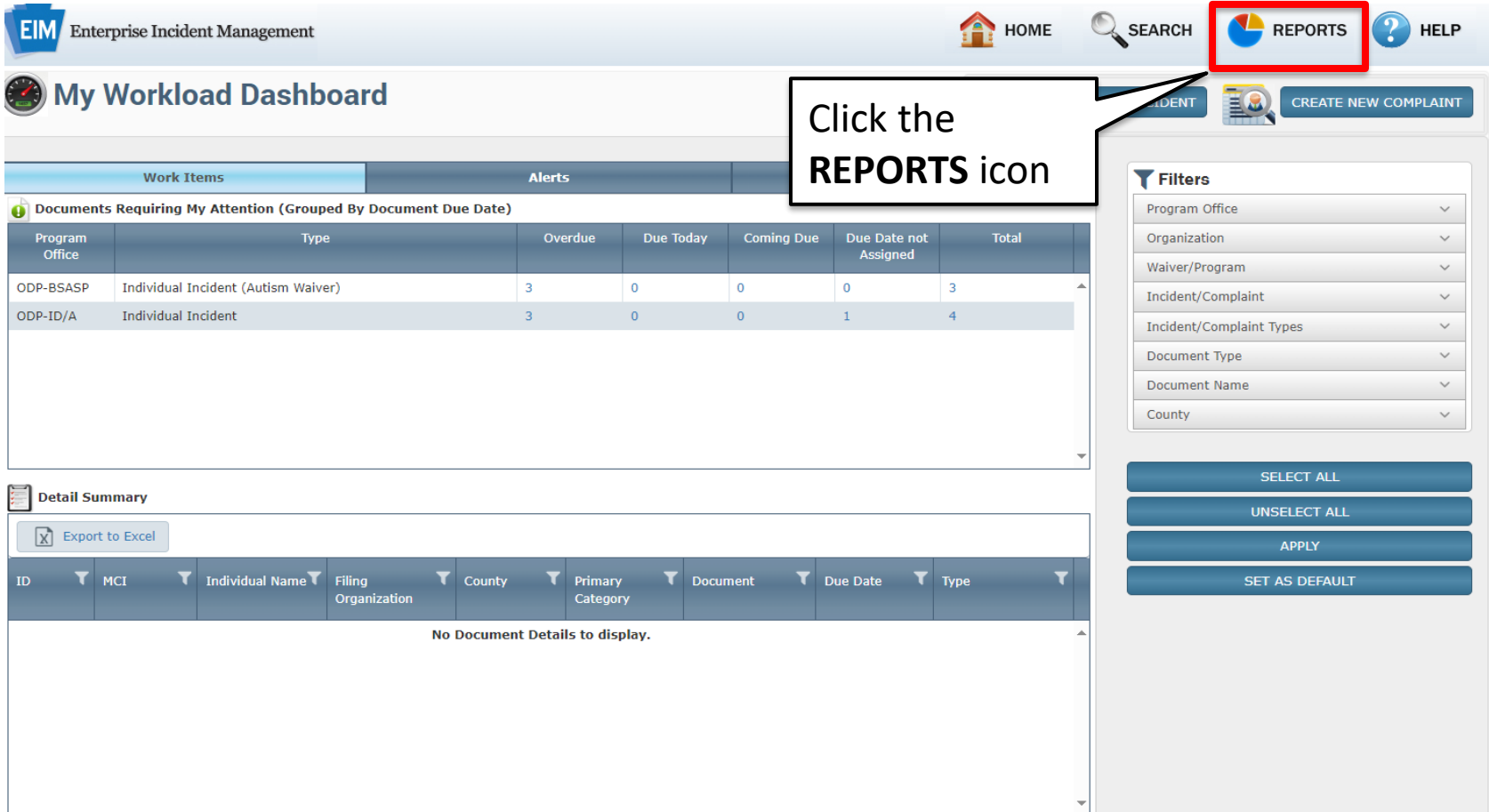
The screenshot shows the 'Keystone Key' login screen. It features a 'LOGIN' button at the bottom, which is highlighted with a red box. Above the button are two input fields: the first contains the text 'b-prothree' and the second is a password field with a masked password '.....'. To the right of the login fields is a 'Self-service for Business Partner' section with links for 'Forgot User ID', 'Forgot Password', and 'Edit Profile'. Below that is a 'Self-service for Commonwealth Employees' section with a link for 'Change CWOPA Password or Hint Questions'. At the bottom of the page, there is a warning message and a copyright notice.

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How to Access and Locate

The EIM **My Workload Dashboard** screen displays



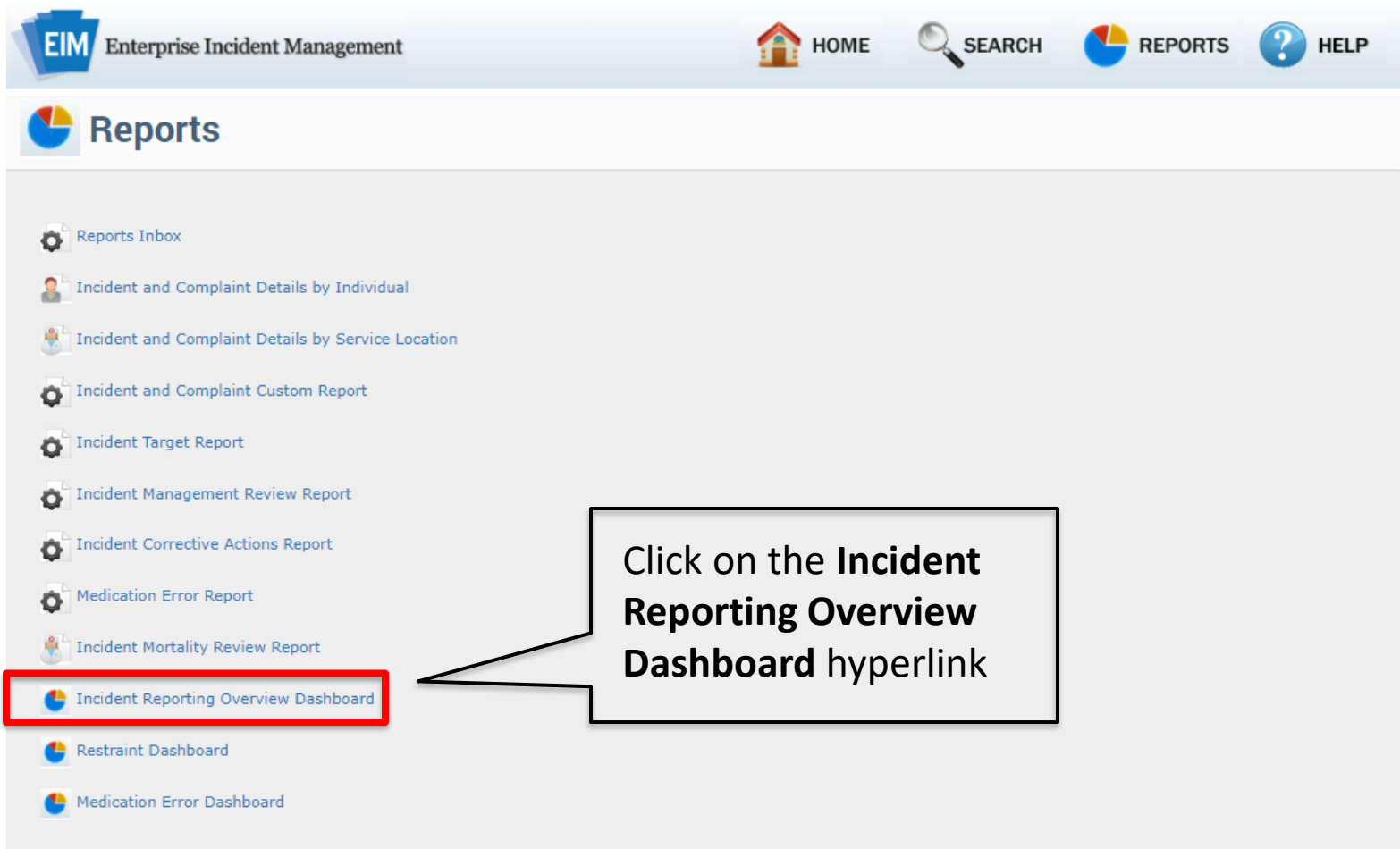
The screenshot shows the EIM My Workload Dashboard interface. At the top, there is a navigation bar with 'HOME', 'SEARCH', 'REPORTS' (highlighted with a red box), and 'HELP' icons. Below the navigation bar, the 'My Workload Dashboard' title is displayed. A callout box with the text 'Click the REPORTS icon' points to the 'REPORTS' icon in the navigation bar. The dashboard content is divided into two main sections: 'Work Items' and 'Alerts'. The 'Work Items' section is titled 'Documents Requiring My Attention (Grouped By Document Due Date)' and contains a table with the following data:

Program Office	Type	Overdue	Due Today	Coming Due	Due Date not Assigned	Total
ODP-BSASP	Individual Incident (Autism Waiver)	3	0	0	0	3
ODP-ID/A	Individual Incident	3	0	0	1	4

The 'Alerts' section is currently empty. Below the 'Work Items' section, there is a 'Detail Summary' section with an 'Export to Excel' button and a table with the following columns: ID, MCI, Individual Name, Filing Organization, County, Primary Category, Document, Due Date, and Type. The table is currently empty, displaying 'No Document Details to display.' On the right side of the dashboard, there is a 'Filters' panel with several dropdown menus for filtering by Program Office, Organization, Waiver/Program, Incident/Complaint, Incident/Complaint Types, Document Type, Document Name, and County. Below the filters are four buttons: 'SELECT ALL', 'UNSELECT ALL', 'APPLY', and 'SET AS DEFAULT'.

How to Access and Locate

The Reports screen displays



EIM Enterprise Incident Management

HOME SEARCH REPORTS HELP

Reports

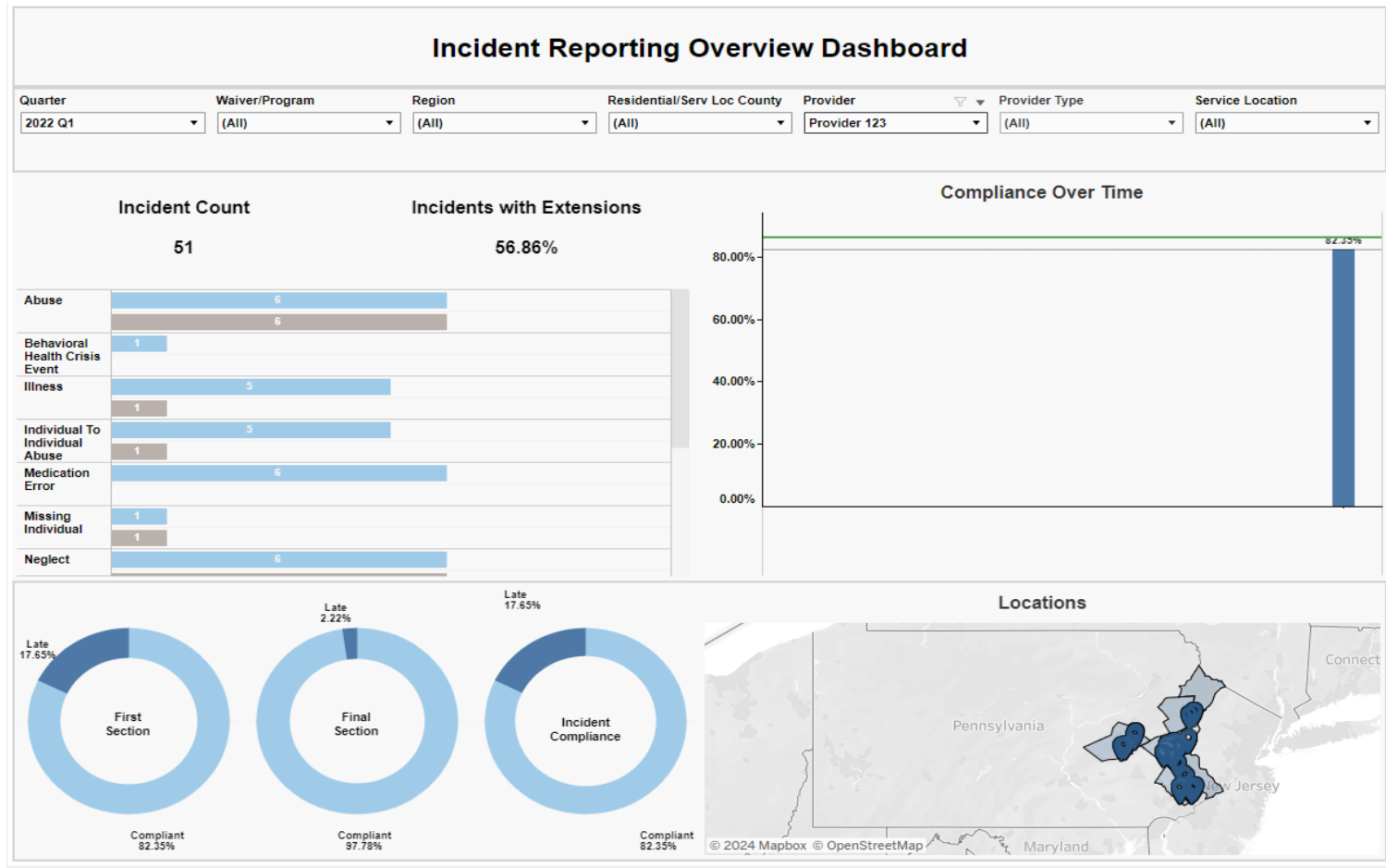
- Reports Inbox
- Incident and Complaint Details by Individual
- Incident and Complaint Details by Service Location
- Incident and Complaint Custom Report
- Incident Target Report
- Incident Management Review Report
- Incident Corrective Actions Report
- Medication Error Report
- Incident Mortality Review Report
- Incident Reporting Overview Dashboard**
- Restraint Dashboard
- Medication Error Dashboard

Click on the **Incident Reporting Overview Dashboard** hyperlink

Incident Reporting Overview Dashboard



The Incident Report Overview Dashboard displays



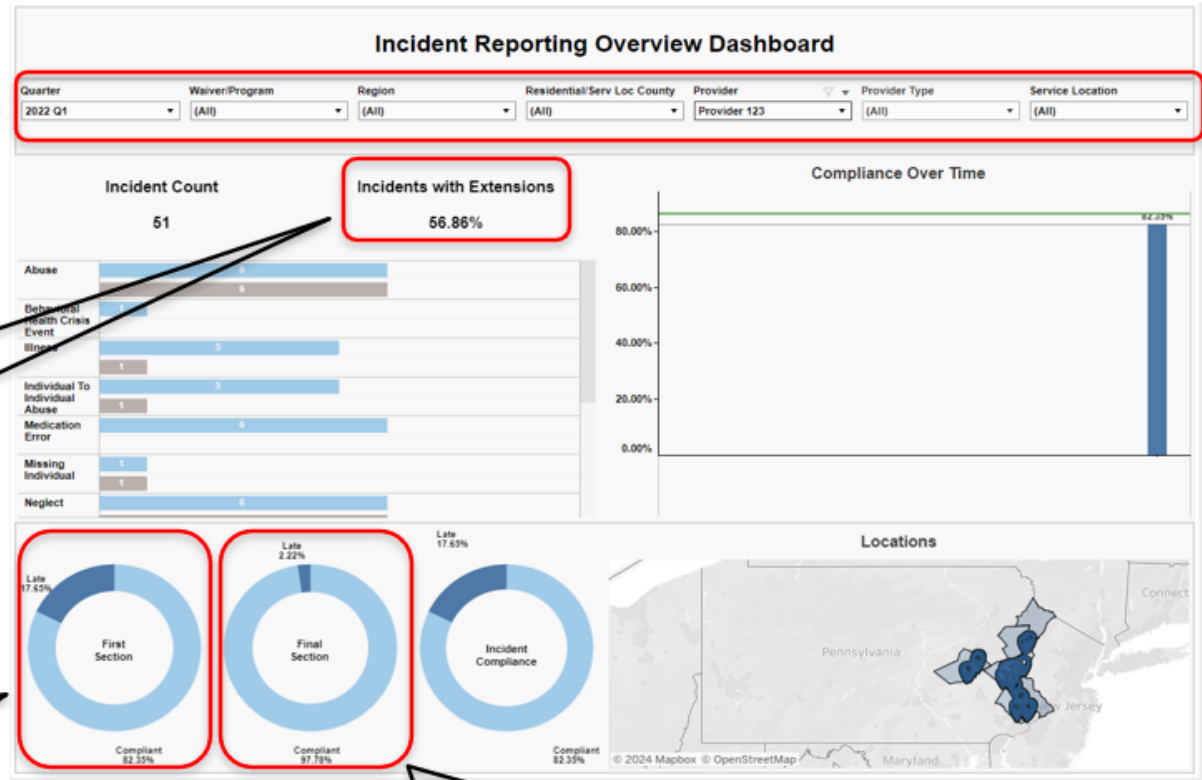
Functionality

Filters are located along the top of the dashboard and allow the user to control the data that appears in the dashboard.

The **Incidents with Extensions KPI** represents the percentage of incidents, displayed on the dashboard, that have an extension(s).

The **First Section Doughnut Chart** represents compliance for First Section documents in various statuses, as compared to all First Section documents for the selected filter values.

The **Final Section Doughnut Chart** represents compliance for Final Section documents in various statuses, as compared to all Final Section documents for the selected filter values.



- **First Section Submission**-The process of entering an incident in EIM begins with inputting information and submitting the incident first section. Once all information has been entered into the First Section document, the user must click the “Submit” button for the incident document status to change to “Submitted”. This action is referred to as the **First Section Submission**. When the First Section is “Submitted”, the incident is officially reported. The **First Section Submission** must occur within 24 hours of the incident discovery date and time (72 hours for Medication Errors and Physical Restraints). When the **First Section Submission** occurs **within** 24 or 72 hours of the incident discovery date and time, it is reported timely. When the **First Section Submission** occurs **after** 24 or 72 hours of the incident discovery date and time, it is **NOT** reported timely.
- **Finalized/Finalization**-The Final Section is the last document of the incident report that the *provider* is required to complete. Once all information has been entered into the Final Section document the user must click the “Submit” button for the incident status to change to “Submitted”. This action is referred to as **Finalization**. Once **Finalization** occurs the incident is **Finalized**. The Final Section must be **Finalized** within 30 days from the incident discovery date. When the Final Section is **Finalized** within 30 days of the incident discovery date, it is finalized timely. When the Final Section is **Finalized after** 30 days from the incident discovery date, it is **NOT** Finalized timely. Note: Incidents can be finalized beyond 30 days with an extension and be timely, if they are finalized by the new due date.
- **Closed**-When an ODP management reviewer approves the Final Section of an incident report, the incident status changes to “**Closed**”. Only ODP can **Close** an incident.

Setting Filters

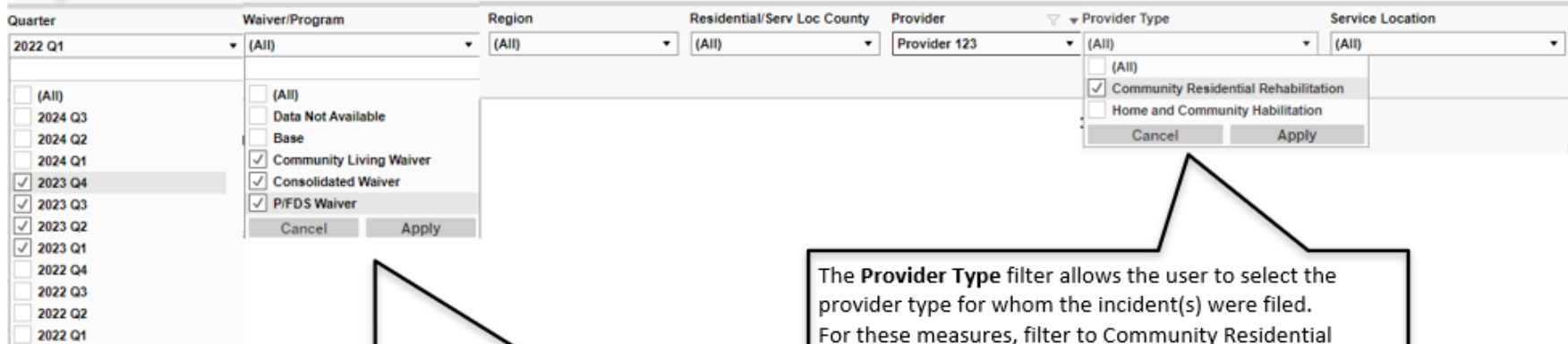
To assess PBC Measures RM-IM.01.2, .01.3, and .01.4, the dashboard must be filtered as shown:

The **Quarter** filter allows the user to select the quarter of the year in which the incident(s) occurred. Users can select multiple quarters. For this example, quarters 1, 2, 3, and 4 were selected for 2023. This will display data for calendar year 2023. **Note:** This filter uses calendar year.

The **Region** and **Residential/Serv Loc County** filters do not need to be adjusted; they should remain as "All". The **Provider** filter does not need to be adjusted as the provider's name automatically appears when the user is a provider.

The **Service Location** filter does not need to be adjusted; it should remain as "All".

Incident Reporting Overview Dashboard



Quarter	Waiver/Program	Region	Residential/Serv Loc County	Provider	Provider Type	Service Location
2022 Q1	(All)	(All)	(All)	Provider 123	(All)	(All)

(All)
 2024 Q3
 2024 Q2
 2024 Q1
 2023 Q4
 2023 Q3
 2023 Q2
 2023 Q1
 2022 Q4
 2022 Q3
 2022 Q2
 2022 Q1

(All)
 Data Not Available
 Base
 Community Living Waiver
 Consolidated Waiver
 P/FDS Waiver

(All)
 Community Residential Rehabilitation
 Home and Community Habilitation

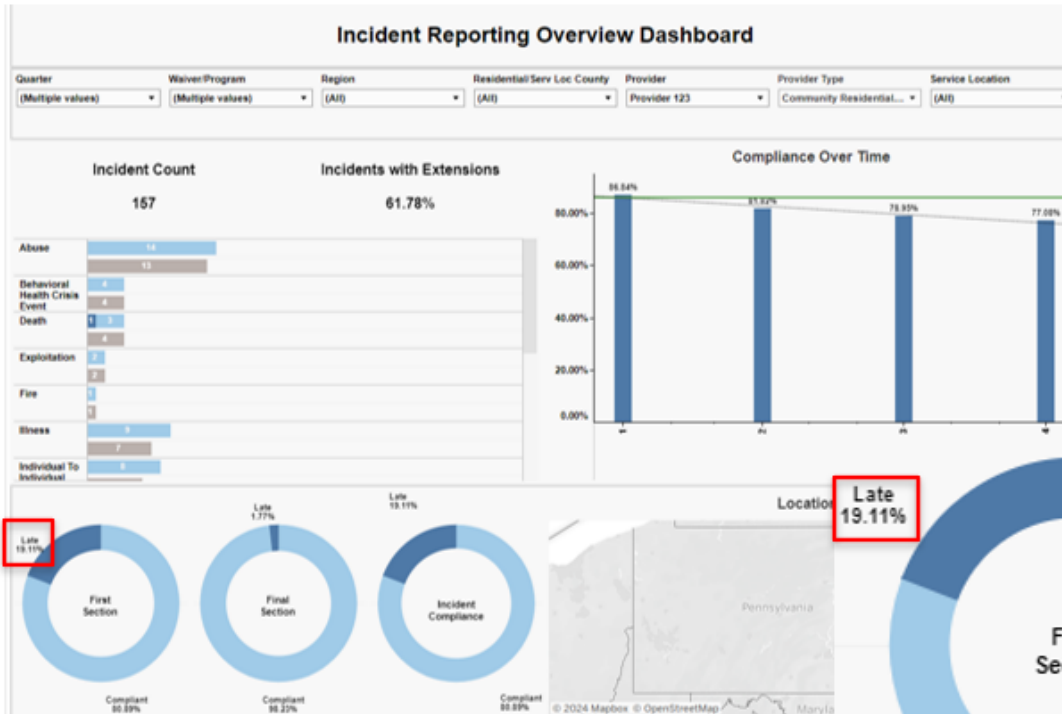
The **Waiver/Program** filter allows the user to select the waiver or program the individual(s) were enrolled in at the time the incident(s) were created. For these measures, filter to HCBS waivers (Community Living, Consolidated, and P/FDS). **Note:** Not all waiver types may appear, select the ones that do.

The **Provider Type** filter allows the user to select the provider type for whom the incident(s) were filed. For these measures, filter to Community Residential Rehabilitation to display Provider Type 52.

Note: As you select the filters, you may notice that selections made in previous filters change. For example, when selecting Community Residential Rehabilitation, in the Provider Type filter, the Waiver/Program filter may change to Consolidated Waiver only. This is expected behavior and normal EIM functionality.

RM-IM.01.2

Provider demonstrates reporting fidelity: Maximum number of incidents not reported timely may not exceed 10% of overall reported incidents by provider.



For this measure, the focus is on timely reporting. Slide 8 explains that First Section Submissions tell us whether an incident was reported timely (within 24 or 72 hours of the incident discovery date and time) or not (after 24 or 72 hours of the discovery date and time).

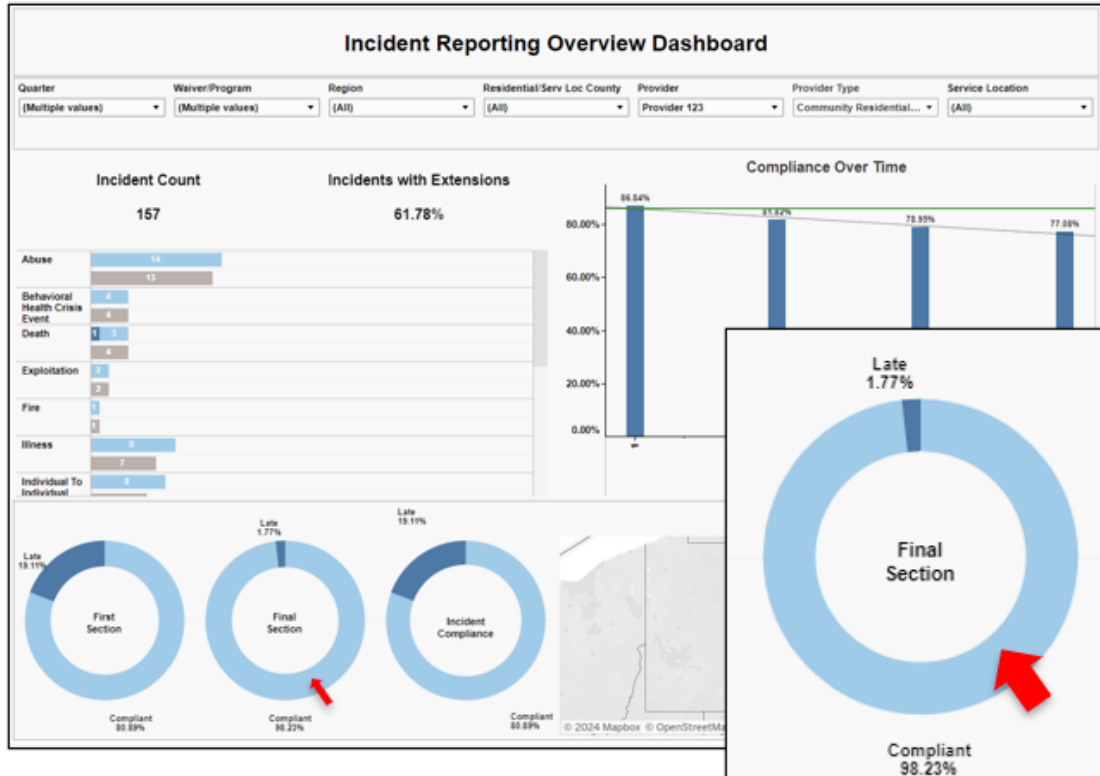
The filters have been set as described in the previous slide. The dashboard is displaying data for incidents filed by Provider 123, for calendar year 2023, for all PT 52 (all Residential services).

The **First Section** doughnut chart, located in the bottom left corner of the dashboard, displays percentage of Compliant (reported timely) and Late (not reported timely). In this example, 19.11% of the incidents filed, were reported Late (not timely) therefore Provider 123 exceeded the allowable 10% threshold for this measure.

*First Section doughnut chart enlarged to enhance visibility.

RM-IM.01.3

Timely finalization of incidents is demonstrated by: At least 90% of incidents are finalized within 30 days of discovery. *****For tier determinations made in 2025, the threshold will temporarily be lowered to 86%. Threshold will return to 90% using CY 2026 data for tier determinations made in 2027.**



This measure focuses on incidents that were finalized within 30 days of the discovery date. This means that the incident had no extensions and was finalized timely. Slide 8 explains that the act of submitting the Final Section=Finalization.

The **Final Section** doughnut chart, located in the bottom left corner of the dashboard, displays percentage of Compliant (finalized timely) and Late (not finalized timely).

The filters have been set as described in the previous slide. The dashboard is displaying data for incidents filed by Provider 123, for calendar year 2023, for all PT 52 (all Residential services).

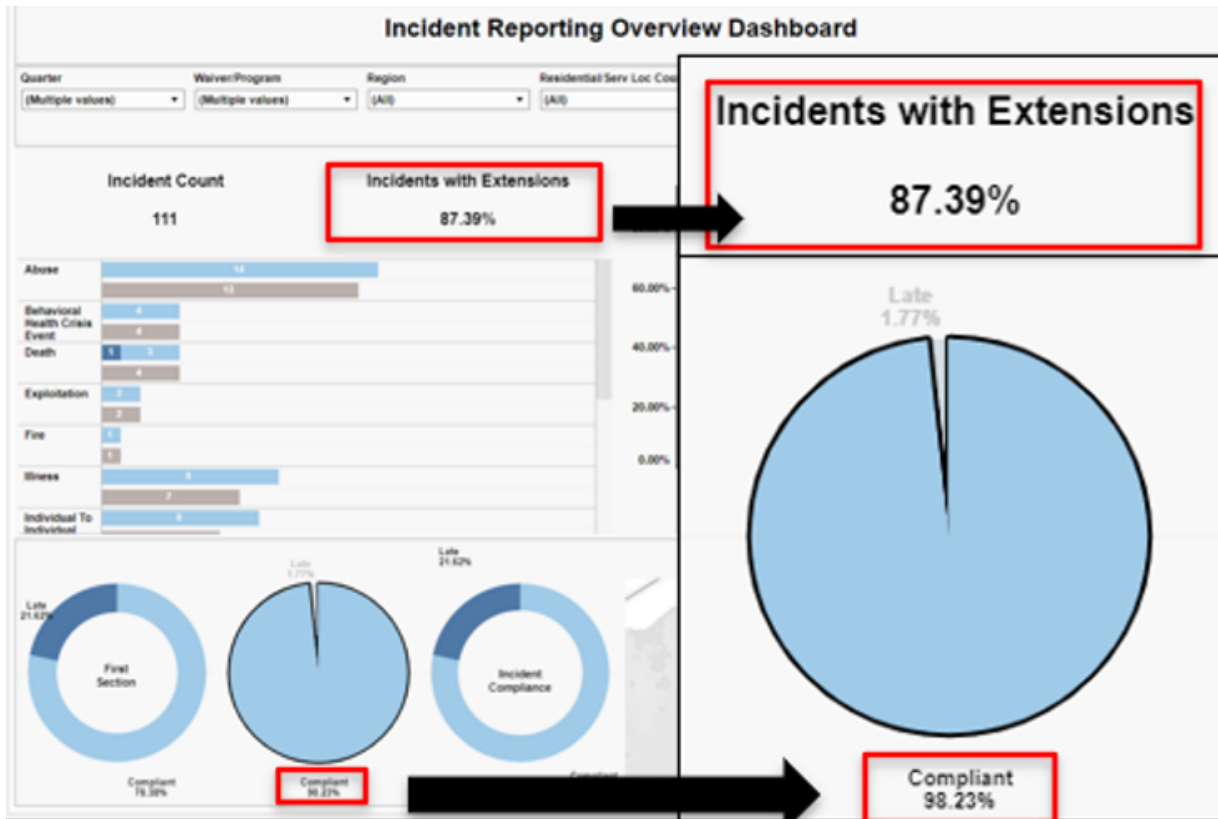
Because this measure focuses on timely finalization, we must apply one additional filter to display only the incidents with a compliant Final Section (finalized timely). To do this, click on the Compliant area (light blue) of the Final Section doughnut chart. See red arrow in the example to the left.

After clicking on the Compliant area of the Final Section doughnut chart, the dashboard will refresh and will display data for only those incidents that were finalized timely. See next slide.

*Final Section doughnut chart enlarged to enhance visibility.

RM-IM.01.3

Timely finalization of incidents is demonstrated by: At least 90% of incidents are finalized within 30 days of discovery. *****For tier determinations made in 2025, the threshold will temporarily be lowered to 86%. Threshold will return to 90% using CY 2026 data for tier determinations made in 2027.**



Now the dashboard is displaying data for incidents finalized timely, including those that have an extension. Incidents with Extensions must be subtracted to calculate the number of incidents finalized within 30 days of the discovery date.

To do this, locate the percent of Final Section Compliant. In this example, that is 98.23%. Now locate the percent of Incidents with Extensions. In this example, that is 87.39%. Now subtract the percent of Incidents with Extensions from the percent of Final Section Compliant. $98.23\% - 87.39\% = 10.84\%$. In this example, 10.84% of incidents were finalized within 30 days of the discovery date therefore Provider 123 did not reach the 90% required for this measure.

*Incidents with Extensions and Final Section Doughnut Chart enlarged to enhance visibility.

RM-IM.01.4



Timely finalization of incidents is demonstrated by: At least 95% of all incidents must be finalized by the due date, and the due date may only exceed 30 days in no more than 5% of those incidents (due dates may exceed 30 days when the provider has notified the Department in writing that an extension is necessary and the reason for the extension).

A provider must first reach 95% or higher of all incidents finalized by the due date.

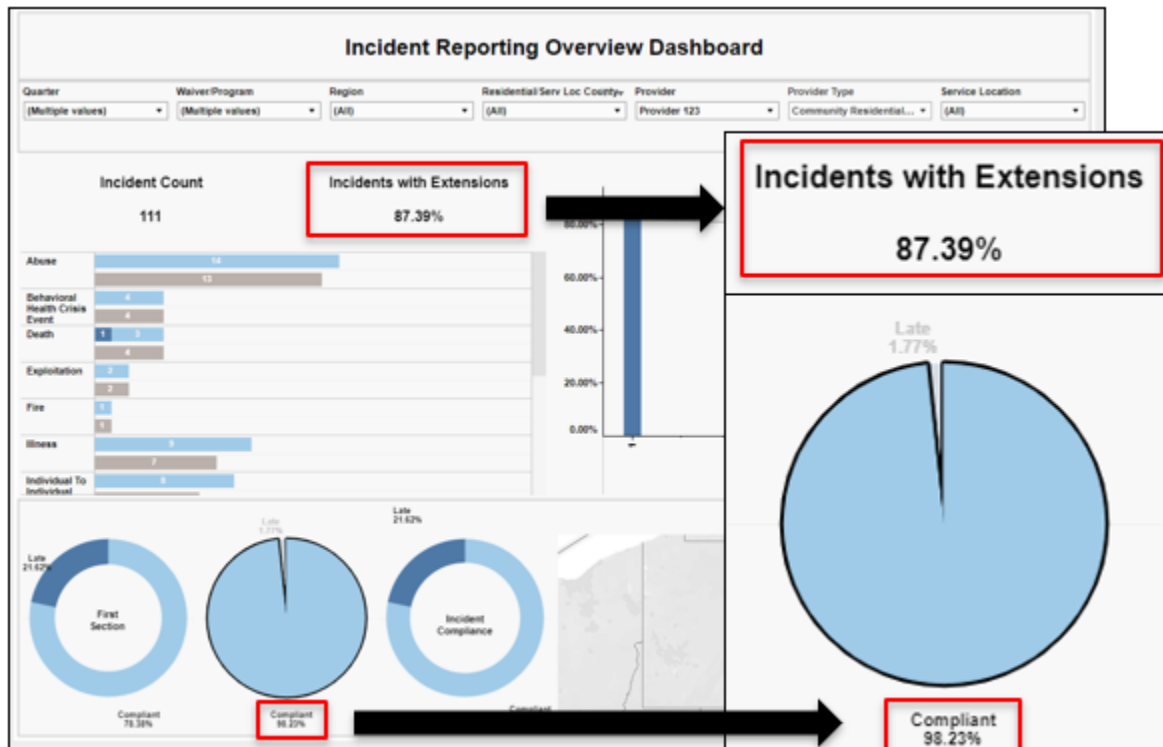


If 95% or more of incidents are finalized by the due date, the Provider can then calculate the percentage of those incidents that exceeded 30 days, that is they had an extension and were finalized by the due date. That percentage cannot exceed 5%.

RM-IM.01.4



Timely finalization of incidents is demonstrated by: At least 95% of all incidents must be finalized by the due date, and the due date may only exceed 30 days in no more than 5% of those incidents (due dates may exceed 30 days when the provider has notified the Department in writing that an extension is necessary and the reason for the extension).



This measure focuses on the overall percentage of incidents that were finalized timely (finalized by the due date) including those finalized within 30 days of the discovery date and those that exceeded 30 days, that is those with an extension. Slide 8 explains that the act of submitting the Final Section=Finalization and tells us if an incident was finalized timely. The Incidents with Extensions indicator tells us what percentage of incidents, displayed on the dashboard, had an extension.

The filters have been set as described in the previous slide. The dashboard is displaying data for incidents filed by Provider 123, for calendar year 2023, for all PT 52 (all Residential services), and has also been filtered to all incidents finalized timely.

In this example, we can see that 98.23% of all incidents were finalized timely however 87.39%, of the incidents finalized timely, were done so beyond 30 days (had an extension) therefore Provider 123 exceeded the allowable 5% threshold for this measure.

*Incidents with Extensions and Final Section charts enlarged to enhance visibility.

Reminders and Considerations



- Performance is measured on the first finalization of the final section. This dashboard brings in the first pass only.
- This dashboard does not include Optionally Reportable Events (OREs) or deleted incidents. When requesting reports to replicate the dashboard, be sure to omit these incidents as this will cause discrepancies in calculations between the dashboard and the report.
- Incident first and final sections with a status of “in progress” are not included on this dashboard.
- Incident data changes overtime as new incidents are filed and incident statuses change. Data ran today will look different from data ran previously.
- Completing the 3-Month Trend Analysis, per the requirements outlined in the IM Bulletin, strengthens monitoring and oversight, allows corrections and improvements to occur throughout the year, and increases overall performance.

Additional Resources



- The following resources provide more in-depth information on all EIM Dashboards. They can also be found on the Learning Management System (LMS)
- [Incident Reporting Overview Analytic Dashboard Training Guide](#)
- [Incident Reporting Overview Analytic Dashboard Tip Sheet](#)
- [Restraint Analytics Dashboard Training Guide](#)
- [Restraint Analytics Dashboard Tip Sheet](#)
- [Medication Error Analytic Dashboard Training Guide](#)
- [Medication Error Reports & Analytic Dashboard Training](#)
- [ODP Run Reports Reference Guide](#)
- [ODP-IDA EIM User Manual 9-22-23](#)

Questions



- For questions related to Performance Base Contracting email: RA-PWODPPBC@pa.gov
- For questions related to the EIM reporting system email: RA-PWODPEIMASSIST@pa.gov
- For questions related to Incident Management policy email: RA-impolicy@pa.gov