

> Job Aid: Covid-19 Incident Reporting for Youth in FC and JJ Placements

This job aid provides the instructions for completing an incident report for a youth who is placed out of the home and who has tested positive for Covid-19 or is symptomatic and presumed positive. At this time, Incident Reports can not be entered for a youth who is placed in a parental home, hospital, or Independent Living Placement.



Note

Private Agencies must inform the MDHHS POS Monitor of any youth who has tested positive for Covid-19, or who has not been tested but is presumed positive. The MDHHS POS monitor or Supervisor will enter the incident report for the youth. If the youth is placed in a CCI, the CCI will enter the incident report.

Navigating to the Provider Overview Screen for a Child Caring Institution

These steps are to be followed if you work for a Child Caring Institution. If you are a MDHHS Foster Care Worker or POS Monitor entering an Incident Report, skip to the next section.

Before you begin

If your facility has multiple organizations, you will need to select the correct organization for which the youth is housed in when signing in to MISACWIS.

1. From the Home Screen, click the **Provider** tab. The Provider Workload screen appears.
2. Click the **Directory** secondary tab. The Provider Search screen appears with the **Organization** list prefilled with the organization you are logged in under.

Home	Intake	Case	Provider	Financial	Administrati
Workload	Directory	Inquiry	Recruitment & Retention	Training	Contracts

Provider Search	Provider Match	Tribal Homes
Provider Search Criteria		
Provider Name:	<input type="text"/>	
Service Group/Category:	<input type="text"/>	Service Type: <input type="text"/>
Service Description:	<input type="text"/>	
Provider Type:	<input type="text"/>	
Organization:	<input type="text" value="Cherry Hills"/>	Provider Status Information: <input type="text"/>
Approval Status:	<input type="text"/>	Member First Name: <input type="text"/>
Member Last Name:	<input type="text"/>	
OR		
MISACWIS Provider ID:	<input type="text"/>	

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3. Click **Search**, and then click select next to your **Provider Name/MiSACWIS Provider ID**. The Provider Summary screen appears.

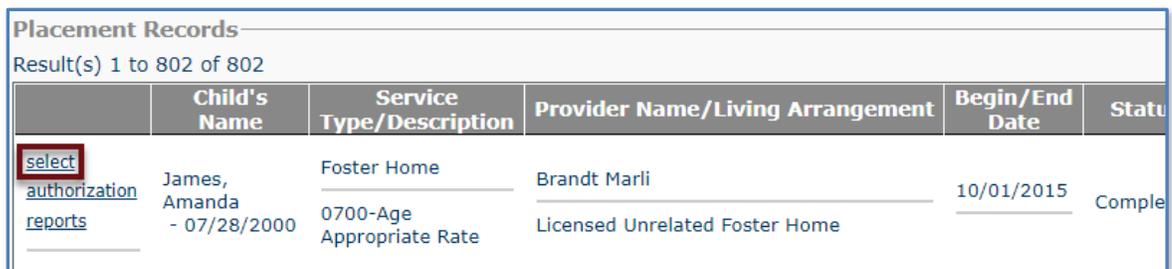


	Provider Name/ MiSACWIS Provider ID	Provider Type	Provider Type Status	Address
select	Cherry Hills / 17910821	Child Caring Institution	IVE Eligible	9517 W RIDGE TRAIL RD, Lansing, MI 48933

4. Continue following the steps listed under Entering the Incident Report.

Navigating to the Provider Overview Screen for MDHHS Foster Care Workers/Supervisors

1. From the Home screen, navigate to the Case Overview screen for the case that you are entering the Incident Report for.
2. From the left hand menu, click **Placement**. The Placement Records screen appears.
3. Click select next to the current placement for the youth that you are entering the incident report for.



	Child's Name	Service Type/Description	Provider Name/Living Arrangement	Begin/End Date	Statu
select authorization reports	James, Amanda - 07/28/2000	Foster Home 0700-Age Appropriate Rate	Brandt Marli Licensed Unrelated Foster Home	10/01/2015	Comple

4. Under **Provider Information**, click the provider's name. The Provider Summary screen appears.

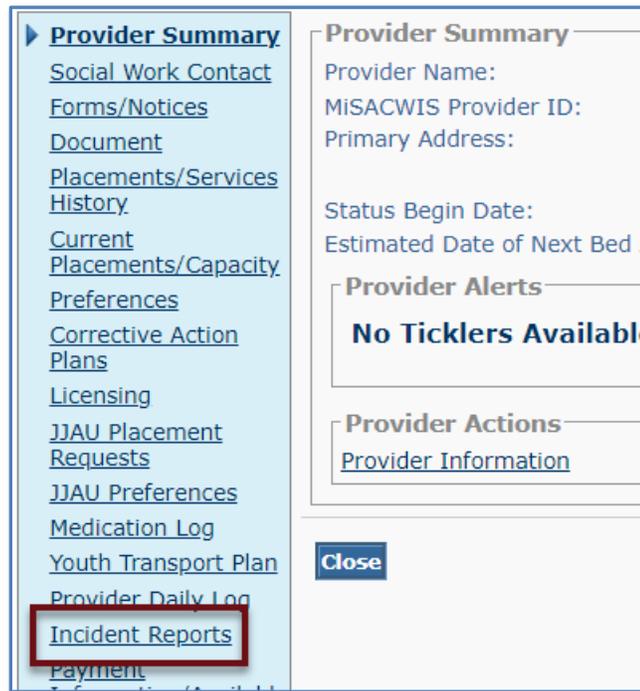


Match Score %	Provider	Service Description
100%	Brandt Marli	0700-Age Appropriate Rate

[Link Provider](#)

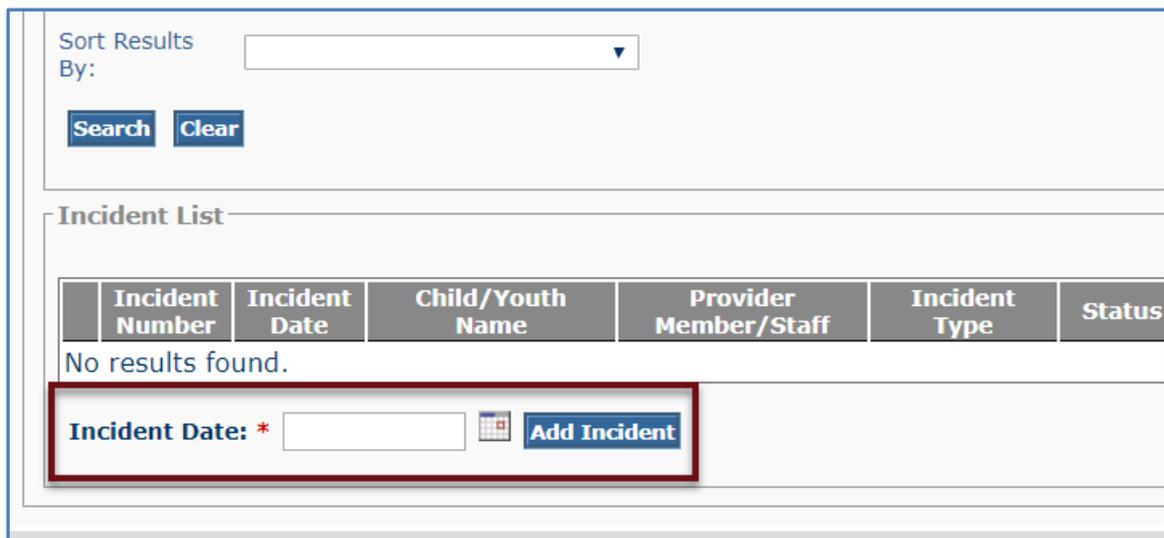
Entering the Incident Report

1. From the left hand menu, click Incident Reports. The Incident Search screen appears.



The screenshot shows a web application interface. On the left is a vertical menu titled 'Provider Summary' with various options: Social Work Contact, Forms/Notices, Document, Placements/Services History, Current Placements/Capacity, Preferences, Corrective Action Plans, Licensing, JJAU Placement Requests, JJAU Preferences, Medication Log, Youth Transport Plan, Provider Daily Log, Incident Reports (highlighted with a red box), and Payment. On the right is a main content area with sections for 'Provider Summary' (fields for Name, ID, Address, Dates), 'Provider Alerts' (No Ticklers Available), and 'Provider Actions' (Provider Information). A 'Close' button is at the bottom.

2. Under **Incident List**, enter the **Incident Date** and click **Add Incident**. The Incident Information screen appears.



The screenshot shows the 'Incident List' search interface. At the top, there is a 'Sort Results By:' dropdown menu and 'Search' and 'Clear' buttons. Below is a table with columns: Incident Number, Incident Date, Child/Youth Name, Provider Member/Staff, Incident Type, and Status. The table is empty with the text 'No results found.' below it. At the bottom, there is a red-bordered box containing the text 'Incident Date: *', a date input field with a calendar icon, and an 'Add Incident' button.

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3. Enter the **Incident Time**, and if applicable the **Location** and **Sub Location**.

Incident Information	Child / Youth Involved	Provider Members / Staff Involved	Incident Factors
Incident Details			
Incident Date:* 04/08/2020		Incident Time: [] : [] AM [] ET []	
Incident #:		Contact Person Info:	
Incident Submitted Date/Time:		Submitted By:	
Provider: Cherry Hills (17910821)			
License Type: Child Caring Institution			
Location: []		Sub Location: []	
Restricted: <input type="checkbox"/>			

4. Enter the following data:

Field	Value
Incident Type	<i>Illness</i>
Incident Subtype	<i>Child/Youth</i>

5. Click **Add Incident Types**.
6. From the **Under MCL722.112b(2), is your facility a child caring institution that contracts with or receives payment from a community mental health services program...** list, select the appropriate response.
7. For **Did Behavior Result in Contact with Law Enforcement**, select the appropriate response.
8. Under **Incident Description**, enter detailed and descriptive information about the youth's health, symptoms, contact with medical professionals, if the youth was tested for Covid-19, other relevant information, and what steps are being taken for the youth's health.
9. Click **Apply**.

Identifying the Youth Involved

1. Click the **Child/Youth Involved** tab. The Child/Youth Involved screen appears.
2. Click **Add Child / Youth**. The Available Child/Youth screen appears.

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3. Select the check box next to the youth's name that the incident report is being generated for. If the name does not appear in the list, click **Other** and search for the child using their MiSACIWS Person ID.

Available Children / Youth	
	Name (MiSACIWS Person ID)
<input type="checkbox"/>	Garcia, Sarah (17800821)
<input checked="" type="checkbox"/>	Hartwell, Alex (17800829)
<input type="checkbox"/>	Hartwell, Brandon (17780820)
<input type="checkbox"/>	Moore, Phillip (17800904)
<input type="checkbox"/>	Thompson, Alex (17800817)
<input type="checkbox"/>	White, James (17800843)
<input type="checkbox"/>	Wilks, Darrell (17800844)

Other

Ok **Cancel**

4. Click **Ok**. You are returned to the Child/Youth Involved screen.
5. Click detail next to the youth's name. The Child/Youth Involved Details screen appears.

Provider > Incident Reports > Child / Youth Involved

Incident Information	Child / Youth Involved	Provider Members / Staff Involved	Inc
Child / Youth Involved In Incident			
	Child/Youth Name	DOB/Age	Gender
detail	Hartwell, Alex (17800829)	10/03/2003 (16)	Male

Add Child / Youth

6. From **Incident Role** list, select **Victim**.
7. From the **Was the child / youth placed directly by a court (NOT MDHHS)** list, select the appropriate response.
8. Select the appropriate responses for the questions about restraints, seclusion, and suicide watch. If the answer is yes for any, the appropriate date and time in/out questions must be answered.

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- From the **Was Child Injured** list, select **No**.
- For **Was Child Ill or Became Ill**, select **Yes**.
- From the **Medical Attention Required** list, select **No** if the youth was not given a Covid-19 test and just monitored or select **Yes** if the youth was given a Covid-19 test.
 - If the youth was given a Covid-19 test, under **Serious Injury** select the check box for **Other**, and **Not Inflicted** for **Inflicted By**. In the **Other Description** box, indicated where the Covid-19 test was administered.
- Click **Ok**. You are returned to the Child/Youth Involved screen.
- Click **Apply**.

Incident Factors

- Click the **Incident Factors** tab. The Incident Factors screen appears.
- Select the **Primary** check box next to the youth's name under **Child / Youth Involved**.

Incident Information	Child / Youth Involved	Provider Members / Staff Involved	Incident Factors	
Incident Factors				
Child / Youth Involved				
Primary	Child/Youth Name	Incident Role	DOB/Age	Gender
<input checked="" type="checkbox"/>	Hartwell, Alex (17800829)	Victim	10/03/2003 (16)	Male

- Click **Apply**.

Routing the Incident Report for Approval

- Click the **Incident Information** tab. The Incident Information screen appears.
- Click **Approval**. The Process Approval screen appears.
- From the **Action** list, select **Route to My Supervisor**.
- Click **Save**. You are returned to the Incident Information screen.
- Click **Save**. You are returned to the Incident Search screen.