

## Incident Management (IM) Bulletin Effective July 1, 2021 ODP Announcement 21-051

### **AUDIENCE:**

All stakeholders

### **PURPOSE:**

This communication is a reminder to all stakeholders that on July 1, 2021, the IM Bulletin 00-21-02 (which was issued March 1, 2021) will be effective. Changes to the Enterprise Incident Management (EIM) system that align with the new bulletin will go live July 1, 2021.

In addition, this communication is intended to draw attention to existing communications, available trainings, and resources, as well as other necessary activities in order to ensure successful implementation.

### **DISCUSSION:**

All Office of Developmental Programs (ODP) stakeholders who are responsible for incident management activities, are now responsible to adhere and implement all policies and procedures that are outlined in the IM Bulletin 00-21-02<sup>1</sup> beginning July 1, 2021.

To prepare stakeholders for the new bulletin, ODP has provided multiple trainings, communications/announcements, and an IM Bulletin Frequently Asked Questions document which can be found on the MyODP website,

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<sup>1</sup> Please see ODP Announcement 21-039 for investigations that will not be mandatory with the effective date of - the IM Bulletin.

<https://www.myodp.org/course/index.php?categoryid=220>, then by clicking on the Incident Management Bulletin link > Documents and Resources

Stakeholders may also find changes to the EIM System, under the course name, *ODP – ID/A: Enterprise Incident Management*, by clicking on the following link:

<https://www.hcsis.state.pa.us/HCSISLMS/pgm/asp/learning/default.asp>

As outlined in the live EIM training session, the following three EIM reporting and functionality activities that will be effective July 1, 2021:

1. The reporting of COVID-19 positive cases will be captured under the primary category of **Illness** and a secondary category of **COVID**. This replaces the use of the reporting categories of *Emergency Room Visit – Illness New* previously communicated in ODP Announcement 20-037.
2. An incident that requires investigation by a Department-certified investigator will contain **two new documents as part of the workflow**:
  - a. The existing Provider Investigation document has been replaced with the *Provider Certified Investigator Report (CIR)*.
  - b. The *Provider Administrative Review* document is a new document and will require completion before an incident may be submitted for review and closure.
3. A new **Incident Administrative Reviewer** user access role (PW-EIM-IncidentAdmRev) has been created in EIM. Providers will ensure that this role is added through Identity Manager by the agency's BP-Admin in order for a user to initiate, data enter, and submit the *Provider Administrative Review* document.

Profile | **Access Roles**

**Select Access Role**

**Search for an access role**

Search for an access role  
 where  =

**Search Results**

Select	Name	Description
<input type="checkbox"/>	PW-EIM-IncidentAdmRev	Incident Administrative Reviewer
<input type="checkbox"/>	PW-EIM-IncidentMgtRev	Incident Reviewer

The following documents are obsolete July 1, 2021:

- Incident Management Reporting Informational Memo (#115-11)
- Reporting Unauthorized Restrictive Interventions Informational Memo (#080-12)
- Incident Investigation Determination Informational Memo (#110-12)
- Incident Report Finalization (#025-15)

Reminder:

Please continue to visit <https://www.myodp.org/course/index.php?categoryid=220> and <https://www.hcsis.state.pa.us/HCSISLMS/pgm/asp/learning/default.asp> as new trainings and resources will to be posted and updated.

**For Future Questions:**

- For policy related questions, contact your county, ODP regional office, or email: [RA-impolicy@pa.gov](mailto:RA-impolicy@pa.gov).
- For EIM related questions, contact the **HCSIS Helpdesk at: 1-866-444-1264**
- ODP-ID stakeholders may also contact: [ra-pwodpeimassist@pa.gov](mailto:ra-pwodpeimassist@pa.gov)
- ODP-BSASP stakeholders may also contact: [ra-basprovidersupprt@pa.gov](mailto:ra-basprovidersupprt@pa.gov).