

Clarity Healthcare Safety Zone Guidelines:

Accessing Clarity Healthcare Safety Zone

To access Clarity Healthcare Safety Zone Incident Reporting system, you can click the icon on your desktop or copy and paste this web address in your browser:

<https://events.healthcaresafetyzone.com/EventsModuleWeb/default.aspx?cs=4b904de1-babb-4e55-91ba-04263d800ba0>

The web address is also available on the staff section of the Center for Family Services website on the Clarity page. <https://www.centerffs.org/staff/clarity>

Quick Tips for using the Clarity Healthcare SafetyZone site

- Submitters do not need a log in for this site.
- Top Right of the form indicates the form you are using and incident number assigned.
- Blue Reset button will clear the answers you have selected in the form and starts over
- Blue Cancel button will bring you back to the Clarity Healthcare SafetyZone home page

When using the form, submitters have 60 minutes to complete submission. 5 minutes prior to the time being up a will pop up, reporting that all information will be lost if not completed or saved. If a submitter is idle for 20 minutes (no keyboard or mouse movement) the system will close the application and the incident will need to be re-submitted.

- * Note Required Questions. The incident cannot save without answering the question. When the incident is complete and Save is selected a note will pop up promoting the user to answer any required questions that were missed.
- Red Save button will save the incident report
- Incident Type and Location are the drivers of notifications in the system. It is important to pick the correct program and type of incident to route the incident to the correct supervisors.

Detailed Instructions for completing the form

This provides the basic instructions for the Incident Reporting Form. The Employee Incident Report Form is very similar in structure.

Access the Clarity Healthcare SafetyZone website:

<https://events.healthcaresafetyzone.com/EventsModuleWeb/default.aspx?cs=4b904de1-babb-4e55-91ba-04263d800ba0>

Click “Submit Event” and select the appropriate form incident reporting form or employee incident report form.

- Select the Date/Time of the incident
- **Which Program/department is reporting the incident?** This identifies the program that is reporting the incident. If the program has multiple sites, you will be prompted to select the sub program for the identified youth.

- **Location Type** identifies the physical location the incident occurred. If the incident occurred at the program location, select “Yes”. If the incident did not happen at the program location you must select where the incident occurred:
 - CFS Satellite Location – These are locations not owned by Center For Family Services but we have programs that use the space.
 - Community – This location would be an incident that happens in the community, such as if an incident at public place such as a courthouse, police station, school, community venue, etc.
 - When this option is selected, the writer will be prompted to enter the address where the incident occurred.
 - Individual/Family Home – Select this if the incident happened at the home of the individual or family and not in the program location.
 - When this option is selected, the writer will be prompted to enter the address where the incident occurred.
 - Other CFS Location – This location would be selected if an incident occurred at a Center For Family Services location that is same as the program the client is involved. For example, if a youth in our residential program was at the outpatient counseling building and an incident occurred.
 - When this option is chosen, the writer will be prompted to select the Center For Family Services location from the pre-populated drop down.
 - Other – This option would be selected if an incident occurred that does not fit into the other categories
 - When this option is selected, the writer will be prompted to enter the address where the incident occurred.
- The specific program location describes where the incident occurred such as the kitchen, hallway or driveway.
- **Type of Incident** identifies the type of incident that occurred. This section is broken down to several categories with sub categories in each area. An incident can fall into more than one category. The writer should choose the main event type and then can add up to 3 additional event types, if indicated. Listing of event types and definitions for each category can be found in Appendix A and Appendix B.
- **Who was involved** identifies the person the Incident Report is being written about. The writer will select the category the person falls into. A client would be identified as a “Person Served”. The writer will then be prompted to enter the First Name and Last Name of the identified person.
 - **Were additional parties involved** identifies if anyone else was involved in the incident. If more than one client is involved in an incident, complete a separate incident report for each person involved. The incident report for each person should have the identified youth name listed for “Who was involved”. All mentions of other clients in the report should be noted by using another identifier such as the client’s EHR # or initials.
 - The writer will be prompted to enter the Gender Identity, Race/Ethnicity, and EHR number (if known) for the individual identified.
- **Was this person injured** identifies if the person involved in the incident was injured. If Yes is selected then the writer will be prompted to answer the following questions:
 - The writer will select the **type of injury sustained** from the options listed

- The writer will select the **affected area** of the injury
- **Did The Condition result in?** This will identify if the person identified received medical care and the type of care received.
- **Is this person involved with another program** identifies if the person identified in the incident report is involved in any other Center For Family Services' programs.
- **Did this Incident involve a Safety Technique or Personal Emergency Intervention Hold** identifies if behavior management techniques were used. This option should be selected for all guides, deflections, physical interventions or holds implemented.
 - If yes was selected, the writer will be prompted to answer the following questions:
 - **Date and Time hold started and ended**
 - **Type of Hold** identifies the Safe and Positive Approaches approved technique used.
 - **Justification for Hold** identifies the reason for the hold.
 - **Was another Hold involved** identifies if more than one hold was implemented. If more than one hold was implemented, you will be prompted to answer questions about each hold.
 - **Youth condition after hold ended** – Describes the youth response to the hold. The writer should select all that apply from the checklist.
 - **Was medical attention required** asks if following assessment for youth physical condition after hold if additional medical review was required.
 - If Yes, the writer will select from the check boxes the **Type of medical attention required after hold.**

*****Reminder for All Restraints, A Debriefing Form and completion of the Restraint Log are still required. A copy of the Debriefing Form must be attached to this Incident Report. *****

- **Who has been notified/contacted** documents who was notified of the incident. This section details the name(s) of who was contacted, the date and time contact was made, and the type of contact that was made. *****Submission of IR to the system does not constitute notification*****
 - The writer will answer these questions for the following questions:
 - **Was Supervisor contacted?**
 - **Was family/guardian notified?**
 - **Was 911 was called?**
 - The writer will be prompted to note if Emergency Services Reported to the site. If Yes is selected, the type of emergency services that arrived must be selected as well as a brief summary of the actions/services provided by the emergency services provider.
 - **Was DCP&P or the NJ Abuse Hotline notified?** If yes, the writer must record the name of the person notified and screener number.
 - **Was the UIR Coordinator notified of A+ incidents?** If yes, the writer will be prompted to elect if the UIR falls under DCF or DHMAS.
 - **Was anyone else notified** identifies if anyone else not listed was notified of the incident such as a CMO worker, APN or emergency contact.

- **Was an Unusual Incident Report required** identifies if a UIR was completed. When the incident type is selected, it will note if a UIR is required for the incident.
- **Events leading up to the Incident:** Describes the behavior/actions and/or events immediately before the incident, and the staff's responses to these actions. Ex. this could include any attempts to use self-regulation tools, or de-escalation techniques.
- **Describe the Incident:** Describes the incident in behavioral specific detail (actions that can be observed and measured). This includes behaviors from the individual, staff actions, and injury or damage to property until the incident ended.
- **Action Taken:** Identifies what the user did following the incident. The writer should check all that apply.
- **Results/Response or action Taken:** Describes what occurred after the incident ended, including other individuals' and staff's reactions, and plans to provide follow-up.
- **Was this event witnessed by anyone not listed above?** If yes, the writer will enter information for any witnesses not previously entered into the incident report.
- **Reporter Name** identifies the writer of the report.
- **Reporter Title** identifies the writer's position.
- **Select Save** will save the incident. If any required questions were missed, it will prompt the user to complete the required questions.
- **Are there any attachments for this event?** If yes is selected the writer can attach a document or video to the incident report. Examples of types of documentation that can be attached are:
 - Correspondence
 - Legal Documentation
 - Search and seizure forms
 - Medical Paperwork or discharge instructions
 - Debriefing form
 - Police Report
- The writer will then be notified that the event has been successfully saved.

Supervisor/Reviewer Responsibilities

Supervisors are provided a log in for the Clarity HealthCare SafetyZone website. This log in allows the supervisors to review submitted incidents. As a supervisor or reviewer, the log in credentials are the same as the network credentials (to sign onto an agency computer). This is often firstname.lastname and does not include an email handle. To access the submitted incident reports, the supervisor selects the My Review button from the left hand side of the web page.

- Supervisors/Reviewers in the notification chain will automatically receive an email from notification@healthcaresafetyzone.com informing them that an incident report was submitted that they need to review. The reviewer can access the form by clicking the link in the email or logging into the Clarity HealthCare SafetyZone site.
- The Supervisor selects the form they are reviewing. For Incident reports, select the Incident Reporting Form from the drop down and press select, and do the same for Employee Incident Report.

- The My Review Grid is a tool to help reviewer manage the events they are responsible for. Reviewers can sort the information by any field selected. By selecting “Review Events Grid” will show the reviewed all events that have been submitted by staff and are still open.
- To select an event the reviewer should click on the event number, which will bring the reviewer to the Live Event. The live event tab shows the reviewers all of the questions and answers from the original report. If a reviewer has the authority to do so, they will have an “Edit” button on the far right, which will allow reviewers to edit any questions that need to be edited. The Change Logs keeps track of any and all changes.
- The Follow Up Tab is the communication center and where the incident follow up is tracked.
 - At the top of the page, the communication center will note all reviewers that were automatically notified of the incident and the date that they reviewed the incident.
 - Reviewers have the ability to add other staff who have Clarity HealthCare SafetyZone accounts but may have not been automatically notified of an incident. Example of this may be therapists, case managers, or nursing staff who need to be made aware of the incident and will have a role in follow up.
 - To add additional reviewers, they should be selected from the drop down list and an optional note can be sent with the notification.
 - View/Assign tasks allows the reviewer to send other reviewers a note of what is needed in order for the incident to be completed.
 - The Assistant Program Director/Program Director will answer the following questions:
 - Were all appropriate Actions Taken?
 - Were additional Notifications Required
 - Was a UIR submitted (All submitted UIR’s must be added via attachment)
 - Did IAIU respond to the incident?
 - Follow Up Actions Taken
 - Is additional follow up needed?
 - Managers Comments
 - What can be done to prevent chances of a similar incident occurring?
 - Follow-Up Status
 - Under Review
 - Review Completed
 - Status notes the status of all submitted incident reports
 - Submitted – the incident was submitted by the writer
 - Pending – Reviewed, but unable to close as items are still outstanding
 - Closed – This notes the incident follow up is completed and has been closed. Incident closure can only be completed by a member of the leadership council (AVP, Regional Director, etc.) or their designee.
- Change Log tracks any changes that are made to the original incident report.
- Original Event tab shows the initial report submitted by the writer. The original tab will not change regardless of edits, follow up and investigation.
- Attachment allows the reviewer to review and add supporting documentation for an incident.

Supervisor Reminders

1. Supervisors are responsible for notifying appropriate members of the chain of command regarding serious incidents.
2. Once a supervisor is informed that IAIU is involved in an incident, they are responsible for notifying senior leadership and the Quality Improvement Director immediately.
3. Supervisors are responsible for ensuring debriefing occurs as outlined following a critical incident. A critical incident includes (but is not limited to the following categories):
 - Physical Restraint
 - Property damage Over \$500.00
 - Medication Error requiring medical treatment.
 - Suicide Attempt
 - Physical Assault that led to injury
 - All A+ and A level category incidents as defined by the DCF Unusual Incident Reporting and Management System.
4. Supervisors are responsible for ensuring staff are trained on the importance and rationale for reporting incidents.
5. Supervisors are responsible for providing constructive, helpful, and supportive feedback to staff after reviewing incident reports. This includes ensuring all elements of the incident report have been thoroughly completed.
6. Supervisors are responsible for providing an update on all open incidents every 30 days until each incident is closed. This update is completed within Clarity.

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