Office of Developmental Disabilities Services
Quality Improvement – Incident Management

OREGON DEPARTMENT OF Human Services

Frequently Asked Questions
Case Management Entities (CMEs) Incident Management and IMT Reports

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Q: Is there an easier way to create a report in the Centralized Abuse Management (CAM) system to extract information? We have to run multiple reports at my CME for different reporting requirements.

A: In CAM, CMEs have been provided a "canned report". This can be ran anytime there is a need to review SI data. ODDS has also provided reports for CMEs to complete their IMT submissions. These can be accessed in the reports tab under the "ODDS IMT Reports" folder. Each CME can also create a custom report that meets their business process needs. If needed, CAM Support can also assist with building a custom report for a CME if you know what information and fields you are looking for. ODDS has published a Quick Reference Guide for CAM that includes how to customize the canned reports already built in CAM.

Q: For smaller CDDP's with regionalized contracts, do we need to still complete the death review and abuse section of the IMT report? Or is the other CDDP that completes the abuse work responsible for completing that section?

A: Each CME is responsible for completing and submitting their IMT report in full. If a CDDP contracts with a larger CDDP for abuse, there should be a business process set between the two in regard to sharing applicable data and collaboration for the IMT repot. See OAR 411-415 for more information.

Q: Is it an expectation that a Recommended Action (RA) be required for all Serious Incidents?

A: In CAM, a RA must be assigned to every SI before it can be closed in CAM. This can also include marking the box "No Recommended Action". Often, "No recommended Action" is

selected, when there is an action being taken. The action being recorded in CAM could reflect action already taken, pending action, or future planned action. For example, if an individual is taken to the Emergency Room and the physician gives the provider instructions to follow up with the primary care physician within a week, the recommended action may be that the CME staff will follow up with the provider to ensure the follow up appoint has been scheduled/is occurring. The intent is to capture all information related to the incident within the SI record in CAM.

Q: It can be a duplication of work for CME staff to enter information in CAM and then again in the progress note. How is this being considered?

A: We have heard this in a few venues and ODDS is taking steps towards addressing the duplication of work. All information that relates to the incident needs to be stored and entered within the SI record. Some CMEs have developed business processes where a progress note is linked to the SI record as an attachment before the SI is closed within CAM.

Q: Our CME struggles with getting information around urgent care or emergency room visits. We work with people who live independently, and they may self-report inconsistently when it comes to name of the hospital or date, they may not get the summary to us, etc. Is there a way to get this information?

A: You could use Point Click Care (PCC) and cross reference the information related to hospital encounters or emergency room visits.

Q: What is the expectation around entering SIs when case managers are not able to make contact with individuals or their families for a serious incident? Many of our SIs are entered late because of this.

A: As outlined in OAR, SIs are required to be entered into the CAM system within 7 days of the CME being notified of the incident. This includes incidents that CMEs become aware of using PCC. We advise that case managers enter the SI into CAM with the known information to ensure timely entry and continue to follow up with the individual or family. SIs can be updated until they are closed and per OAR, CMEs have 30 days to close a SI. During those 30 days, a CME can add information to an SI record to ensure the information is accurate.

Q: Why do we still need to have staff complete the Information Security and Privacy Office (ISPO) training since Transmittal DD-PT-25-029 states it is no longer needed for CAM access?

A: This transmittal only removes the requirement to send the ISPO training certificate or ISPO equivalent training certificate when requesting a CAM account or reactivation of a CAM account. The ISPO training or equivalent is still a requirement as outlined in CDDP and Brokerage contracts with the ODHS ISPO policy. CMEs should continue to take the training upon hire and annually as outlined in the policy and keep records, as the ODDS Quality Assurance reviews will continue to review as part of their process.

Q: Do all acts of physical aggression need to be entered as an SI?

A: As outlined in OAR, "physical aggression" is defined as an intentional action taken by an individual meant to harm another person that results in injury, including to the individual. If an individual engages in physical aggression that causes injury to themselves or others, then it should be documented as a SI. Please see the updated Serious Incident Definitions Handout with additional information.

Q: Our CME was under the impression that SIs can only be marked with one category. How should we enter SIs with multiple categories in a singular event? Do we need to create multiple SIs?

A: Serious Incidents can be entered with multiple categories selected. A singular SI can have multiple SI types. There is no need to create multiple SIs for one incident – unless it involves multiple individuals that receive services. For example, if an individual engages in Physical Aggression, causes harm to themselves and needs to received Emergency Medical Care, this would be one SI for the individual with both Physical Aggression and Emergency medical Care selected in the same SI record.

Q: If someone goes to the Emergency Room and gets admitted, do we capture that as an Emergency Medical Care (EMC) SI and Unplanned Hospitalization?

A: If an individual is admitted to the hospital from the Emergency Room, record the SI only as an Unplanned Hospitalization in CAM. You do not need to record the Emergency Medical Care as the information gathered and data points are the same for each.

Q: When we are analyzing the data, there are Brokerage individuals in our reports and can skew our data. Are we supposed to be including them in our reports?

A: Each CME is responsible for reviewing their own IMT data and completing their own IMT reports. Because CDDPs are responsible for Abuse Investigations and Death Reviews for their county, Brokerage individuals will be included in CDDP Death Review reports and Abuse Investigation reports. Brokerage individuals should not be included in CDDP Serious Incident reports. If this occurs, please reach out to CAM Support.

Q: Our CDDP completes abuse investigations for Behavioral Health as well. What does ODDS do with this information?

A: The IMT Reports are specific to individuals enrolled in IDD services and should not include data from BH individuals. ODDS is not reviewing or requesting this data for these reports.

Q: If we are not able to find an individual in CAM using the search feature, can we add them manually?

A: There are multiple record types in CAM, several of them are uploaded directly from other systems and cannot be created by a CAM user. If you are not able to find an individual receiving IDD services in CAM, please contact CAM Support.

Q: If we notice that a provider agency's address is wrong or the provider is missing from CAM, how do we correct this?

A: There are multiple record types in CAM, several of them are uploaded directly from other systems and cannot be created by a CAM user. If you are not able to find a provider, or notice the address is incorrect, please contact CAM Support.

Q: If we have questions around CAM or incident management, who should we reach out to?

A: If you have questions around serious incidents, incident management, IMT reports, or general business processes with incident management, please contact the IMT inbox at IMT.Submissions@odhs.oregon.gov . If you have questions specific to CAM access, requesting a CAM report, or issues with CAM, please reach out to CAM.Support@odhs.oregon.gov .