



Illinois Outcomes UIR System

JULY 8, 2016

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IDCFSUIR

Agenda

- ▶ What is Changing?
- ▶ What is Illinois Outcomes (IO)?
- ▶ What is the IO UIR system?
- ▶ What's the difference between IO UIR and NOMAD?
- ▶ When To Use the IO UIR system?
- ▶ Where is the IO UIR system?
- ▶ How do I log into the IO UIR system?
- ▶ How do I use the IO UIR System?
- ▶ Feedback, Q&A

What is Changing?

- ▶ Replace/reduce the paper CFS 119 -> collect/fax -> scan -> print -> sort -> NOMAD UIR data entry process
- ▶ Allow POS, CWS workers, and DCFS Clerical users access to the IL Outcomes UIR system for direct data entry
- ▶ Additional Procedure 331 (Unusual Incident Reporting) changes are being evaluated to further streamline the UIR process

What is Illinois Outcomes (IO)?



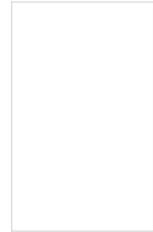
- ▶ Web-based data collection system developed for residential agency service providers to capture and report on information about their client youth
 - ▶ **Unusual Incident Reporting**
 - ▶ **UIR Rate of Occurrence Report**
 - ▶ Residential Treatment Outcomes System
 - ▶ Child & Adolescent Needs and Strengths assessments
 - ▶ Facility Observation Reporting for Monitors
 - ▶ Statewide Provider Database

What is the IO UIR System?



- ▶ UIR Data Capture system
- ▶ Automatically copies UIRs to NOMAD M-F 4AM
- ▶ Captures most of the CFS 119 form data
- ▶ Available to all Residential Agency users
- ▶ Roughly 3,500-4,000 UIRs/month data entered
- ▶ Replaced the CFS 119 form -> fax to DCFS process in 2008
- ▶ After IO UIR launched, UIRs from residential agencies:
 - ▶ Doubled in volume
 - ▶ Lag time between incident date and submit date dropped by 90%

What's the Difference?



Item	System	NOMAD	IL Outcomes
Involvement Types		CO, CX, PL, FO, FX, IN, ED, DL, OT	CO, CX, PL
Form CFS 119 data?		Yes	Yes
Form CFS 119-A data?		Yes	No
Email notification?		Yes	No
Search		UIR # , CYCIS ID, Name, Provider ID, Provider Name, Narrative keywords	UIR #, CYCIS ID, Name, Provider ID, Incident date, Submit date
UIR numbering		00#####	90#####
Incident Types		1 set of types applies to all parties	Each party has specific types

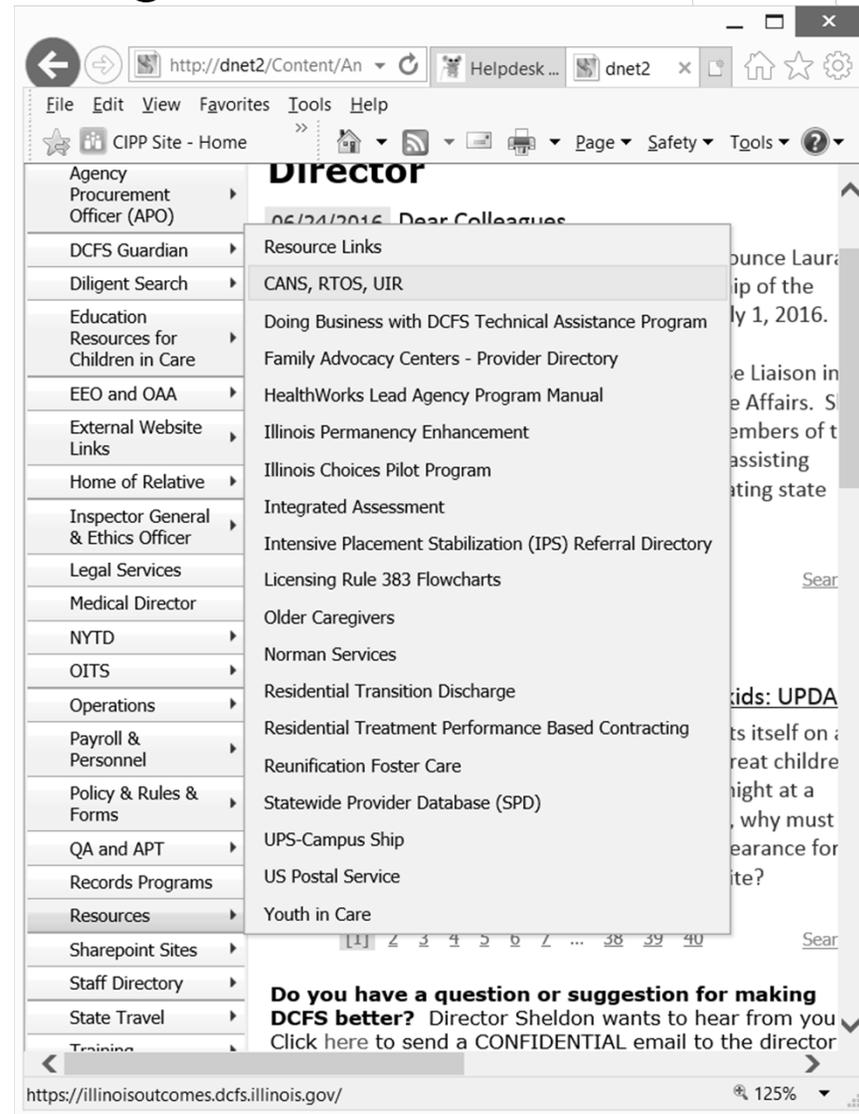
When To Use the IO UIR system?



- ▶ Use the **IO UIR** system for
 - ▶ Open Child Cases (CO)
 - ▶ except for CFS 119 with I01 or I02 Incident Types
 - ▶ Closed Child Cases (CX)
 - ▶ POS facilities/staff (PL)
- ▶ Use the **NOMAD** IO UIR system for
 - ▶ Open Family Cases (FO)
 - ▶ Closed Family Cases (FX)
 - ▶ Investigations (IN)
 - ▶ DCFS employee (ED)
 - ▶ DCFS Foster Home (DL)
 - ▶ Other (OT)
 - ▶ CFS 119A – Final Disposition

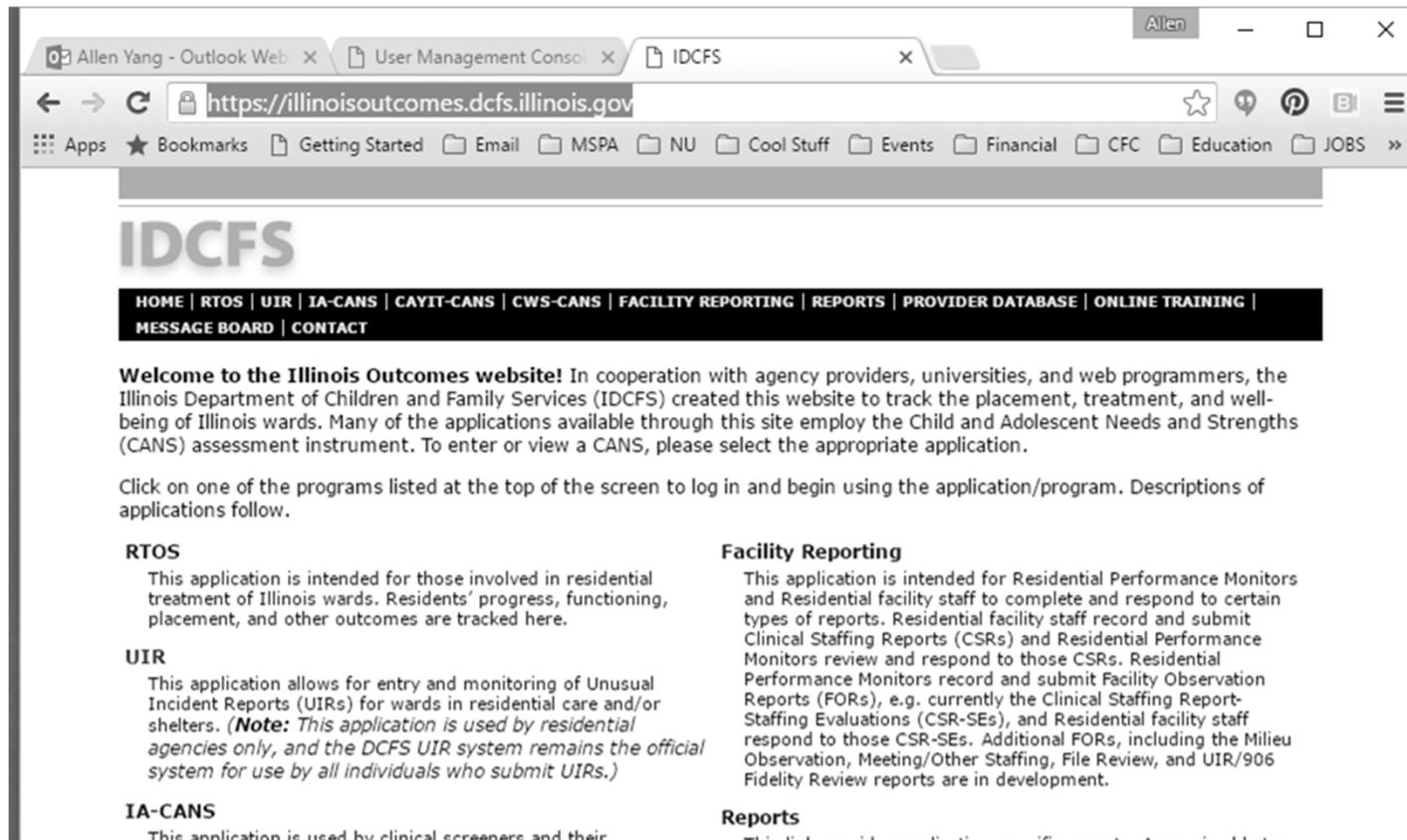
Where is the IO UIR System?

- ▶ DNET
 - ▶ Resources
 - ▶ CANS, RTOS, UIR



Where is the IO UIR System?

- ▶ IL Outcomes homepage
 - ▶ <https://illinoisoutcomes.dcf.illinois.gov/>



The screenshot shows a web browser window with the URL <https://illinoisoutcomes.dcf.illinois.gov/>. The page features the IDCFS logo and a navigation menu with links to HOME, RTOS, UIR, IA-CANS, CAYIT-CANS, CWS-CANS, FACILITY REPORTING, REPORTS, PROVIDER DATABASE, ONLINE TRAINING, MESSAGE BOARD, and CONTACT. The main content area includes a welcome message and descriptions for RTOS, UIR, IA-CANS, Facility Reporting, and Reports.

IDCFS

HOME | RTOS | UIR | IA-CANS | CAYIT-CANS | CWS-CANS | FACILITY REPORTING | REPORTS | PROVIDER DATABASE | ONLINE TRAINING | MESSAGE BOARD | CONTACT

Welcome to the Illinois Outcomes website! In cooperation with agency providers, universities, and web programmers, the Illinois Department of Children and Family Services (IDCFS) created this website to track the placement, treatment, and well-being of Illinois wards. Many of the applications available through this site employ the Child and Adolescent Needs and Strengths (CANS) assessment instrument. To enter or view a CANS, please select the appropriate application.

Click on one of the programs listed at the top of the screen to log in and begin using the application/program. Descriptions of applications follow.

RTOS
This application is intended for those involved in residential treatment of Illinois wards. Residents' progress, functioning, placement, and other outcomes are tracked here.

UIR
This application allows for entry and monitoring of Unusual Incident Reports (UIRs) for wards in residential care and/or shelters. (**Note:** *This application is used by residential agencies only, and the DCFS UIR system remains the official system for use by all individuals who submit UIRs.*)

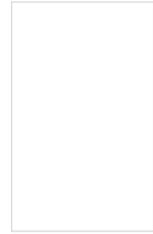
IA-CANS
This application is used by clinical screeners and their

Facility Reporting
This application is intended for Residential Performance Monitors and Residential facility staff to complete and respond to certain types of reports. Residential facility staff record and submit Clinical Staffing Reports (CSRs) and Residential Performance Monitors review and respond to those CSRs. Residential Performance Monitors record and submit Facility Observation Reports (FORs), e.g. currently the Clinical Staffing Report-Staffing Evaluations (CSR-SEs), and Residential facility staff respond to those CSR-SEs. Additional FORs, including the Milieu Observation, Meeting/Other Staffing, File Review, and UIR/906 Fidelity Review reports are in development.

Reports
This link provides application-specific reports. A user is able to

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IO – First Time Log In



- ▶ Find the email entitled “Password Reset Complete for illinoisoutcomes.dcf Illinois.gov” containing your username and a temporary password

Password Reset Complete for illinoisoutcomes.dcf Illinois.gov

DELETE REPLY REPLY ALL FORWARD



Helpdesk.OITS@illinois.gov

Sun 6/26/2016 10:59 AM

Mark as unread

To: Allen Yang;

Your password for the illinoisoutcomes.dcf Illinois.gov systems has been reset.

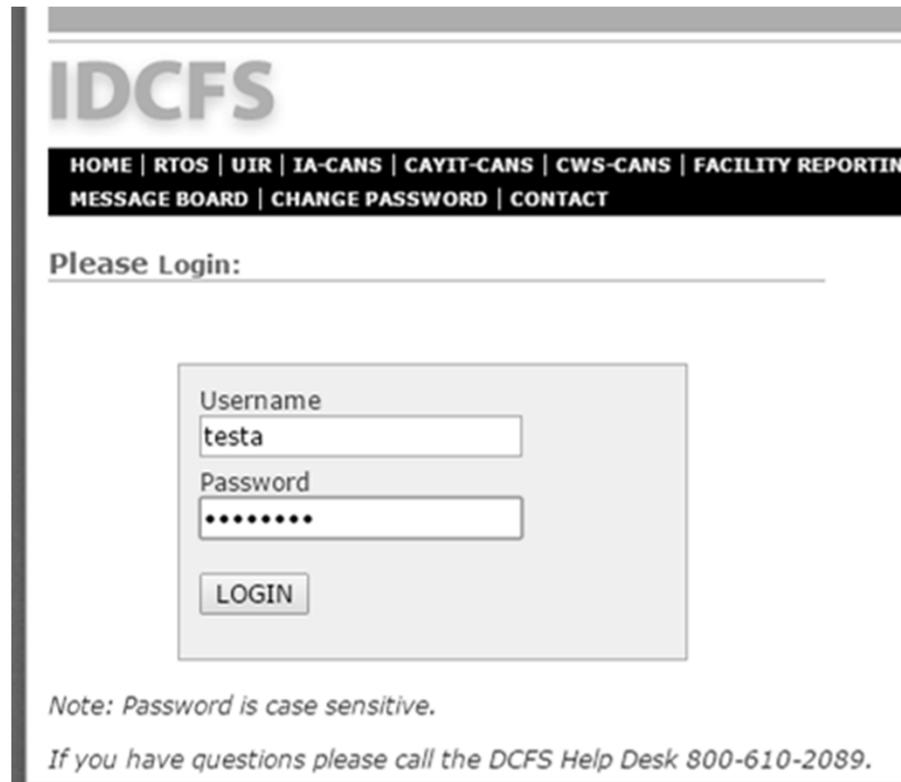
Your username is: testa

Your new password is: saP9P#rb

IO – First Time Log In



- ▶ User ID – DNET ID
- ▶ Password – copy and paste the temporary password from email



The screenshot shows the IDCFS login interface. At the top, the logo 'IDCFS' is displayed in a large, bold, grey font. Below the logo is a black navigation bar with white text links: 'HOME | RTOS | UIR | IA-CANS | CAYIT-CANS | CWS-CANS | FACILITY REPORTING | MESSAGE BOARD | CHANGE PASSWORD | CONTACT'. Underneath the navigation bar, the text 'Please Login:' is followed by a horizontal line. The main login area is a light grey box containing two input fields: 'Username' with the text 'testa' and 'Password' with a masked password of seven dots. A 'LOGIN' button is located below the password field. At the bottom of the login box, there is a note: 'Note: Password is case sensitive.' and a footer line: 'If you have questions please call the DCFS Help Desk 800-610-2089.'



Change Password

- ▶ Enter Current Password – copy the temp password again
- ▶ Enter a New Password – enter new password twice
- ▶ Click on Change Password

IDCFS

HOME | RTOS | UIR | IA-CANS | CAYIT-CANS | CWS-CANS | FACILITY REPORTING | REPORTS | PROVIDER DATABASE | ONLINE TRAINING |
MESSAGE BOARD | CHANGE PASSWORD | CONTACT

Change Password

You are required to change your password before you can access the application. You could be locked out of UIR, if you do not change your password now.

Enter Current Password:

Enter New Password:

Confirm New Password:

NOTE: Your new password must be at least 8 characters and must contain letters(at least one uppercase and one lowercase letter), numbers and at least one special character from (#, \$ and @).

IDCFSUIR

New Password Rules



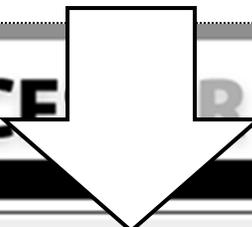
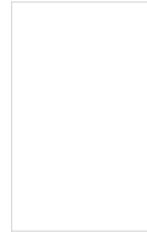
- ▶ At least 8 characters
- ▶ At least 1 UPPER CASE LETTER
- ▶ At least 1 lower case letter
- ▶ At least 1 numeric digit (0..9)
- ▶ At least one special character (# \$ or @)
- ▶ Cannot be one of your previous five IO passwords

Use IL Outcomes or NOMAD UIR?



- ▶ Does the UIR have Involvement Types other than CO/CX/PL?
 - ▶ Use NOMAD UIR
 - ▶ IL Outcomes only allows data entry for CO/CX/PL
- ▶ Does the UIR have I01 or I02 Incident Types?
 - ▶ Use NOMAD UIR
 - ▶ IL Outcomes requires extra data entry not included in the CFS 119 form
- ▶ Is there a CFS 119A (Final Disposition) form attached to the UIR?
 - ▶ Use IL Outcomes to enter the UIR
 - ▶ Use NOMAD to enter the Final Disposition the next day

IO UIR Home Page



IDCE **UIR** Logged on : testa : [Change Password](#) : [Logout](#)

▶ Home ▶ Create UIR ▶ Search UIRs ▶ Reports Help

Current UIRs

Listed below are UIR reports that are of current interest or may need your attention. By clicking on any of the items listed (name, CYCIS case ID, etc) you will be taken to the UIR. The line above gives you a choice of functions you may need to do, such as create a new UIR or search for a UIR not on the list below.

UIRs Not Submitted
UIRs may still be edited prior to final submission.

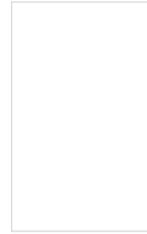
No UIRs found.

Last Name	First Name	DCFS	CYCIS Case ID	UIR #	Incident Date	Involvement Code	Incident Type	RSF
Nothing found to display.								

For explanation of export options, please go to Help.

HOME | RTOS | UIR | IA-CANS | CAYIT-CANS | CWS-CANS | FACILITY REPORTING | PROVIDER DATABASE | MESSAGE BOARD | ONLINE TRAINING | CONTACT |

IO UIR – Create – Page 1



IDCFSUIR

Logged on : testa : [Change Password](#) : [Logout](#)

► Home ► Create UIR ► Search UIRs ► Reports Help

CREATE UIR

* Incident Date

* Incident Time HR : MIN am

* Location

Narrative of Incident

* Provide Summary of Incident. Be sure to include:

- The names, telephone numbers and address of witnesses, facility contact (if necessary) and sources on information, etc. not captured in Persons and Facilities Involved in Incident;
- Description of incident (provide who, what and where of incident);
- Detail when using items C, G, I and J from the Immediate Actions Taken Checklist and;
- Summary of follow-up plan for incident.

Always provide the police report number and the date and time of the report if the police are involved. Runaway/Missing and Kidnapping/Abduction UIRs must always include this information.

Check Spelling

Immediate Actions Taken

Click on Add/Remove Immediate Actions for List of Immediate Actions

Incident Reporter

Contact information of the person entering information is automatically put in as reporter. Change reporter if this is incorrect.

* Reporter Name (Last, First) ,

Reporter Phone Number - -

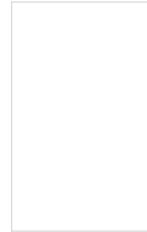
* Reporter Title

DCFS/POS Worker ID #

Facility of Reporter



IO UIR – Create – Page 1



IDCFSUIR Logged on : testa : [Change Password](#) : [Logout](#)

► Home ► Create UIR ► Search UIRs ► Reports Help

CREATE UIR

* Incident Date

* Incident Time :

* Location

CFS 119 (Rev 8-2015) 1

UNUSUAL INCIDENT REPORTING FORM

Instructions: All required (Required) information must be completed to process reports. Leave the UIR Incident Number blank on initial reports. This number is assigned to incidents upon data entry into the UIR System. Include this system-assigned UIR incident number on all related follow-up reports and dispositions.

DATE AND TIME OF INCIDENT (Required) / / : (military time) UIR INCIDENT NUMBER:

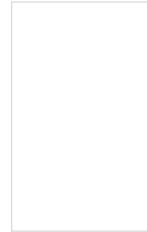
CFS 119 (Rev 8-2015) 2

UNUSUAL INCIDENT REPORTING FORM

Incident Occurred In: (Required - check one)

<input type="checkbox"/> A. Home of Parent	<input type="checkbox"/> D. Group Home	<input type="checkbox"/> G. Medical Hospital	<input type="checkbox"/> I. Residential Treatment Center Inside Illinois
<input type="checkbox"/> B. Home of Relative	<input type="checkbox"/> E. Institution	<input type="checkbox"/> H. Shelter	<input type="checkbox"/> J. Residential Treatment Center Outside Illinois
<input type="checkbox"/> C. Foster Home	<input type="checkbox"/> F. Psychiatric Hospital	<input type="checkbox"/> K. Other: (Describe) <input type="text"/>	

IO UIR – Create – Page 1



Narrative of Incident

*** Provide Summary of Incident. Be sure to include:**

- The names, telephone numbers and address of witnesses, facility contact (if necessary) and sources on information, etc. not captured in Persons and Facilities Involved in Incident;
- Description of incident (provide who, what and where of incident);
- Detail when using items C, G, I and J from the Immediate Actions Taken Checklist and;
- Summary of follow-up plan for incident.

Always provide the police report number and the date and time of the report if the police are involved. Runaway/Missing and Kidnapping/Abduction UIRs must always include this information.

 Check Spelling

CFS 119 (Rev 8-2015)

3

UNUSUAL INCIDENT REPORTING FORM

Part 3. Narrative of Incident

Provide summary of incident. Copy this page and attach as necessary. Be sure to include:

- The names, telephone numbers and addresses of witnesses, facility contact (if necessary) and sources of information, etc. not previously captured in Part 1: Persons and Facilities Involved In the Incident;
- Description of incident (*provide who, what, and, where of incident*);
- Detail when using items C, G, I and J from the **Immediate Actions Taken Checklist** below; and,
- Summary of follow-up plan for incident.

Always provide the police report number and the date and time of the report if the police are involved. Runaway/ Missing and Kidnapping/Abduction UIR's must always include this information.

Summary of Incident (Required)

IDCFSUIR

IO UIR – Create – Page 1



Immediate Actions Taken

Click on Add/Remove Immediate Actions for List of Immediate Actions

Immediate Actions Taken Checklist

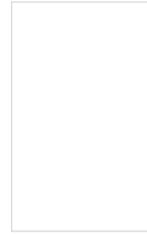
Check All That Apply:

<input type="checkbox"/> A. Ward examined or treated by medical staff	<input type="checkbox"/> H. Ward clinically evaluated by a mental health professional
<input type="checkbox"/> B. SACY evaluation/protective plan implemented	<input type="checkbox"/> I. Treatment plan reviewed/modified (describe above)
<input type="checkbox"/> C. Program-level safety interventions (describe above)	<input type="checkbox"/> J. Program staffing levels adjusted (describe above)
<input type="checkbox"/> D. Emergency placement	<input type="checkbox"/> K. Consultation/technical assistance requested from DCFS
<input type="checkbox"/> E. CERAP conducted	<input type="checkbox"/> L. Parents/relative/legal guardians notified
<input type="checkbox"/> F. Special 1:1 staffing	<input type="checkbox"/> M. SCR Hotline called on: SCR Date <input type="text"/> / <input type="text"/> / <input type="text"/>
<input type="checkbox"/> G. Other (describe above)	SCR Number <input type="text"/>

Note: make additional copies of this page and attach as needed.

CFS 119 (Rev 8-2015) 4

IO UIR – Create – Page 1



Immediate Actions Taken Add / Remove Immediate Actions

Click on Add/Remove Immediate Actions for List Immediate Actions

A large, hollow downward-pointing arrow is positioned below the text 'Click on Add/Remove Immediate Actions for List', pointing towards the checklist below.

Immediate Actions Taken Checklist

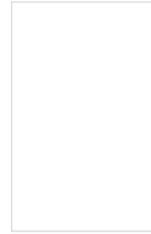
Done

Select all that apply

- A : Ward examined or treated by medical staff
- B : Safety plan implemented
- C : Program-level safety interventions (describe in narrative)
- D : Emergency placement
- E : CERAP conducted
- F : Special 1:1 staffing
- G : Other: describe in narrative
- H : Ward clinically evaluated by a mental health professional
- I : Treatment plan reviewed/modified (describe in narrative)
- J : Program staffing levels adjusted (describe in narrative)
- K : Consultation/technical assistance requested from DCFS
- L : Parents/relative/legal guardian notified
- M : SCR Hotline called

Done

IO UIR – Create – Page 1



Incident Reporter [Change](#)

Contact information of the person entering information is automatically put in as reporter.
Change reporter if this is incorrect.

* **Reporter Name (Last, First)** ,

Reporter Phone Number - -

* **Reporter Title**

DCFS/POS Worker ID #

Facility of Reporter

CFS 119 (Rev 8-2015) 4

UNUSUAL INCIDENT REPORTING FORM

Part 4. Reporter of Incident

Employee Reporting Incident: **(Required)** Case Manager ID # of Reporter:

Title of Reporter: **(Required)** Telephone # of Reporter:

Facility of Reporter: Date Report Completed: **(Required)** / /

Date UIR Received From POS Provider: / /



IO UIR - Create - Page 1



Incident Reporter [Change](#)

Contact information of reporting agency. Entering information is automatically put in as reporter.
Change reporter if this information is incorrect.

* Reporter Name (Last, First) ,

Reporter ID: - -

* Reporter Agency:

DCFS/BOS Worker ID #:

Lookup Staff

Lookup: Exact Search

By: Worker ID First Name Last Name

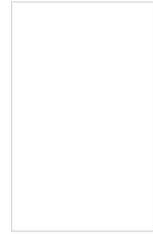
Lookup Results

169 staff members found, displaying 1 to 5:
[First/Prev] [1](#), [2](#), [3](#), [4](#), [5](#), [6](#), [7](#), [8](#), [9](#), [10](#), [11](#), [12](#), [13](#), [14](#), [15](#) [Next/Last]

Worker ID	First Name	Last Name	Agency
<input type="radio"/> 003694	Gregory	Smith	DCFS
<input type="radio"/> 003921	Tanya	Smith	DCFS
<input type="radio"/> 003974	Kip	Smith	DCFS
<input type="radio"/> 004149	Shirley	Smith	DCFS
<input type="radio"/> 004350	Susan	Smith	DCFS

SAVE & CO

IO UIR – Create – Page 1



Incident Reporter [Change](#)

Contact information of the person entering information is automatically put in as reporter.
Change reporter if this is incorrect.

* Reporter Name (Last, First) ,

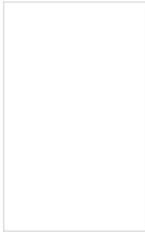
Reporter Phone Number - -

Reporter Title

DCFS Worker ID #

Facility of Reporter

IO UIR – Create – Page 2



IDCFSUIR
Logged on : testa : [Change Password](#) : [Logout](#)

▶ Home ▶ Create UIR ▶ Search UIRs ▶ Reports
Help

Persons & Facilities Involved in the Incident

Please choose the appropriate involvement code below. For CO or CX involvement codes a Lookup for children's data from the DCFS CYCIS data system will be provided after clicking on OK.

Involved Parties

Involvement Code:

CO : Open child case ▼

--Select--

CO : Open child case

CX : Closed child case

PL : POS (offices, facilities, staff)

OK

Cancel

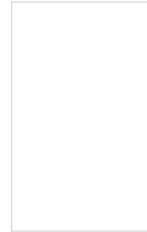
HOME | RTOS | UIR | IA-CANS | CAYIT-CANS | CWS-CANS |
MESSAGE BOARD | ONLINE TRAINING | CONTACT |

Part 1. Persons and Facilities Involved in the Incident

Copy this page as necessary for each person involved in the incident. Separately register all wards residing in a foster or relative home when the incident involves a relative or foster home. See the bottom of this page for involvement codes. Register other witnesses, other sources of information or facility contacts in Part 3: Narrative of Incident.

<p>1. Involvement Code*: (Required): <input style="width: 80px;" type="text"/></p> <p>2. Person Involved (Required) List each individual separately, e.g. make separate entries for each natural parent, or child in sibling group, or other involved party</p> <p>Name (required): Last <input style="width: 100px;" type="text"/> First <input style="width: 100px;" type="text"/></p> <p>Birth Date: <input style="width: 40px;" type="text"/> / <input style="width: 40px;" type="text"/> / <input style="width: 40px;" type="text"/> Docket Number: <input style="width: 100px;" type="text"/></p> <p>Case ID # (Required for open/closed cases): <input style="width: 100px;" type="text"/></p>	<p>1. Involvement Code*: (Required): <input style="width: 80px;" type="text"/></p> <p>2. Person Involved (Required) List each individual separately, e.g. make separate entries for each natural parent, or child in sibling group, or other involved party</p> <p>Name (required): Last <input style="width: 100px;" type="text"/> First <input style="width: 100px;" type="text"/></p> <p>Birth Date: <input style="width: 40px;" type="text"/> / <input style="width: 40px;" type="text"/> / <input style="width: 40px;" type="text"/> Docket Number: <input style="width: 100px;" type="text"/></p> <p>Case ID # (Required for open/closed cases): <input style="width: 100px;" type="text"/></p>
<p>3. Assigned Worker (Required when a worker or investigator is or has been assigned to the</p>	<p>3. Assigned Worker (Required when a worker or investigator is or has been assigned to the involved</p>

IO UIR – Create – Page 2



IDCFSUIR Logged on : testa : [Change Password](#) : [Logout](#)

▶ Home ▶ Create UIR ▶ Search UIRs ▶ Reports Help

Lookup Child / Youth

Search for a client by entering either the CYCIS ID, or the Last and/or First Name and clicking "Lookup". A search by name is a soundex search. If you do not want the soundex feature, click on the "Return Exact Matches" checkbox.

Search (Note: search terms are not case sensitive)

Search By: _____

CYCIS ID:

- OR -

Search By: _____

Last Name:

First Name:

Return Only Exact Matches

IO UIR – Create – Page 2



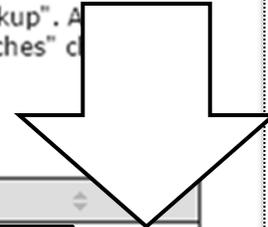
Lookup Child / Youth

Search for a client by entering either the CYCIS ID, or the Last and/or First Name and clicking "Lookup". A name is a soundex search. If you do not want the soundex feature, click on the "Return Exact Matches" checkbox.

Results:

3 Clients found, displaying all Clients:

Client Name	CYCIS ID	Date Of Birth	Age	Sex	Race	
Smith, Alexis						Select
Smith, Alexis						Select
Smith, Alexis						Select



Search (Note: search terms are not case sensitive)

Search By:

CYCIS ID:

- OR -

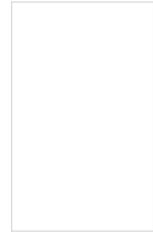
Search By:

Last Name:

First Name:

Return Only Exact Matches

IO UIR – Create – Page 2



Persons & Facilities Involved in the Incident

Information in this section is completed for each person or facility directly involved in the unusual incident. Utilize "Add Additional Persons" tab below as needed. Separately register all wards residing in a foster home or relative home when the incident involves a relative or foster home. Register other witnesses, other sources of information or facility contacts in Narrative of Incident.

Involved Parties

Involvement Code CO : Open child case

* DCFS CYCIS Case ID

Person Involved

* Last Name

* First Name

Date of Birth

Docket #

Assigned Worker

Last Name

First Name

* Worker ID #

* Team

Agency

IO UIR – Create – Page 2



Placement/Facility

Provide Provider ID whenever possible, and:

- Name and address of current location if the involvement code is 'CO' (open child case); otherwise,
- Provide name and address where the incident occurred, including licensing region and provider type code if the involvement code is 'DL' or 'PL'

If you want to change the information, please click on Lookup button.

* **Living Arrangement**

Provider Type

Provider ID#

* **Provider**

* **Address**

* **City**

* **State**

* **Zip**

Unit

Phone Number

Licensing Agency Licensing Agency ID#

Licensing Region

IO UIR – Create – Page 2



* Incident Type(s)

Click on the Add/Remove button to select incidents

Incident Types

Death

- A01 : Death of a DCFS Ward
- A02 : Death of a Former Ward
- A03 : Death of a Non-Ward

Abuse and Neglect

- B01 : Sexual Abuse of a Ward Alleged
- B02 : Abuse of a Ward Alleged
- B03 : Sexual Assault of a Ward Alleged
- B04 : Neglect of a ward Alleged

Sexually Aggressive Children & Youth

- C01 : Sexually Aggressive Behavior by a Ward Alleged
- C02 : Sexually Problematic Behavior by a Ward Alleged

Injury

- D01 : Accidental Injury/Wound
- D02 : Self-inflicted Injury/Wound
- D03 : Restraint Results in Injury to a Ward

IO UIR – Create – Page 2



Immediate Notification of Incident

Lookup the individual given immediate verbal notification of the UIR:

- For UIRs pertaining to wards of the Department, indicate the assigned DCFS or POS caseworker or supervisor.
- For UIRs pertaining to licensed facilities or their employees, indicate the assigned licensing representative.
- For UIRs pertaining to DCFS employees or facilities, indicate the individual notified in the DCFS Advocacy Office.

Lookup Individual

Name of Staff Contacted (Last, First) ,

Title of Staff Contacted

Staff Phone Number - -

Date Notified

Time Notified :

Part 5. For Private Agency/Facility UIR Processing

Date UIR Mailed/Faxed to DCFS: / /

Date UIR Telephoned to DCFS: / / Telephone Number Used: ()

Name of DCFS Staff Contacted:

Title of DCFS Staff Contacted:

IDCFSUIR

IO UIR – Create – Page 2



Immediate Notification of Incident

Lookup the individual given immediate verbal notification of the UIR:

- For UIRs pertaining to wards of the Department, indicate the assigned DCFS or POS caseworker or supervisor.
- For UIRs pertaining to licensed facilities, indicate the assigned DCFS or POS licensing representative.
- For UIRs pertaining to DCFS employees, indicate the assigned DCFS or POS employee or the DCFS Advocate.

Lookup Individual

Name of Staff Contacted (Last Name)

Title of Staff Contacted

Staff Phone Number

Date Notified

Time Notified

Lookup Staff

Lookup: Exact Search

By: Worker ID First Name Last Name

Lookup Results

142 staff members found, displaying 1 to 5:
[First/Prev] [1](#), [2](#), [3](#), [4](#), [5](#), [6](#), [7](#), [8](#), [9](#), [10](#), [11](#), [12](#), [13](#), [14](#), [15](#) [Next/Last]

Worker ID	First Name	Last Name	Agency
<input type="radio"/>	Alton	Jones	UCAN
<input type="radio"/> 518067	Amber	Jones	DCFS
<input type="radio"/>	Angel	Jones	DCFS
<input type="radio"/> 514140	Angela	Jones	CHILDLINK
<input checked="" type="radio"/>	Angela	Jones	

IO UIR – Create – Page 2



Lookup Individual

Name of Staff Contacted (Last, First) ,

Title of Staff Contacted

Staff Phone Number - -

Date Notified

Time Notified :

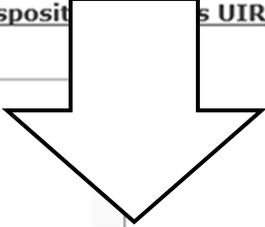
Reporter Recommended Disposition

List recommendations reporter may have for the persons who will be disposing of this UIR, which may include actions that should be taken or plans that should be initiated.

- If there are multiple parties, please specify a recommended disposition for each party.
- You may select a recommended disposition if one has been done for other parties in the UIR or compose a new one.

Select an existing recommended disposition for this UIR

Check Spelling



IO UIR – Summary Page (top)



IDCFSUIR Logged on : testa : [Change Password](#) : [Logout](#)

► Home ► Create UIR ► Search UIRs ► Reports Help

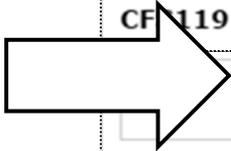
UIR Summary Page

CFS 119 Draft Department of Children and Family Services Print Exit
Unusual Incident Reporting Form

UIR #: 385959 <input type="button" value="Edit"/> <input type="button" value="Delete"/>	Incident Date & Time: 06/24/2016 7:00 AM	UIR Status: Incomplete
---	--	----------------------------------

Summary Of The Incident:
Training

Incident Occurred In:
• H. Shelter



- **UIR # - Write this number on the CFS 119 form**
- **NOMAD will add a “90” to this IL Outcomes UIR number**
 - **For example: IL Outcomes UIR # 385959**
 - **NOMAD UIR #: 90385959**



IO UIR – Summary Page (top)



IDCFSUIR Logged on : testa : [Change Password](#) : [Logout](#)

► Home ► Create UIR ► Search UIRs ► Reports Help

UIR Summary Page

CFS119 Draft Department of Children and Family Services Print Exit
Unusual Incident Reporting Form

UIR #: 385959 <input type="button" value="Edit"/> <input type="button" value="Delete"/>	Incident Date & Time: 06/24/2016 7:00 AM	UIR Status: Incomplete
--	---	---------------------------

Summary of Incident:
Training

Incident Title:
• H. Sh

While the UIR is in INCOMPLETE Status:

EDIT – edit the UIR before submit – add/remove/modify info

DELETE – delete the UIR



IO UIR – Summary Page (top)



IDCFSUIR Logged on : testa : [Change Password](#) : [Logout](#)

► Home ► Create UIR ► Search UIRs ► Reports

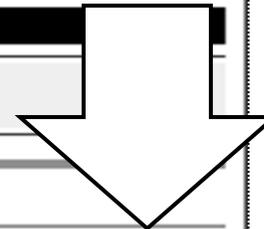
UIR Summary Page

CFS119 Draft Department of Children and Family Services
Unusual Incident Reporting Form

UIR #: 385959 <input type="button" value="Edit"/> <input type="button" value="Delete"/>	Incident Date & Time: 06/24/2016 7:00 AM	UIR Status: Incomplete
---	--	----------------------------------

Summary Of The Incident:
Training

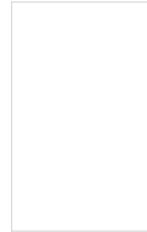
Incident Occurred In:
• H. Shelter



PRINT – Print the UIR
EXIT – Exit to the UIR Home Page



IO UIR Home Page



IDCFSUIR

Logged on : testa : [Change Password](#) : [Logout](#)

[Home](#) | [Create UIR](#) | [Search UIRs](#) | [Reports](#) [Help](#)

Current UIRs

Listed below are UIR reports that are of current interest or may need your attention. By clicking on any of the items listed (name, CYCIS case ID, etc) you will be taken to the UIR. The line above gives you a choice of functions you may need to do, such as create a new UIR or search for a UIR not on the list below.

UIRs Not Submitted

UIRs may still be edited prior to final submission.

One UIR found.

Last Name	First Name	DCFS CYCIS Case ID	UIR #	Incident Date	Involvement Code	Incident Type	RSF
Smith	Alexis	<input type="text"/>	385959	06/24/2016 7:00 AM	CO	E01, J01	2A 08

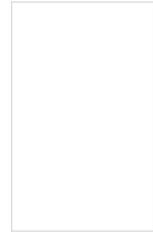
Export options: CSV | Excel | PDF

For explanation of export options, please go to [Help](#).

UIR Homepage will show any UIRs that have not been submitted
Click on the underlined text to open that UIR



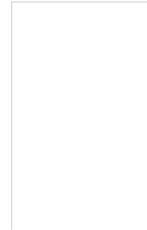
IO UIR – Summary Page (top)



IDCFSUIR			Logged on : testa : Change Password : Logout	
<hr/>				
▶ Home ▶ Create UIR ▶ Search UIRs ▶ Reports			Help	
<hr/>				
UIR Summary Page				
<hr/>				
CFS119 Draft	Department of Children and Family Services Unusual Incident Reporting Form		Print	Exit
UIR #: 385959 <input type="button" value="Edit"/> <input type="button" value="Delete"/>		Incident Date & Time: 06/24/2016 7:00 AM	UIR Status: Incomplete	
Summary Of The Incident:				
Training				
Incident Occurred In:				
• H. Shelter				



IO UIR – Summary Page (bottom)



Immediate Actions Taken:

- F. Special 1:1 staffing
- A. Ward examined or treated by medical staff

Persons/Facilities Involved In The Incident

1. Involvement Code: CO : Open child case

Name:	Smith, Alexis	Placement/Facility:	<input type="text"/>
DCFS CYCIS Case ID:	<input type="text"/>	Address:	<input type="text"/>
Date Of Birth:	<input type="text"/>	Phone Number:	<input type="text"/>
Docket#:	<input type="text"/>	Licensing Agency:	DCFS
Worker:	<input type="text"/>	Licensing Region:	6A : Cook Administration
Worker Agency:	DCFS	Provider ID:	526094
Team:	2A 08		

Living arrangement code: FHB

Incident Types:

- J01: Runaway/Missing Ward
- E01: Medication - Ward Refusal

Recommended Disposition:
Recommended disposition not completed

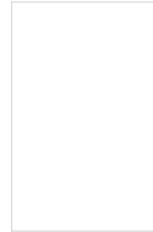
UIR Reporter Information:

Reporter:	Smith, Kip
Title:	Other DCFS Staff
Phone:	217-854-2565
Agency:	
Date Completed:	

This date is automatically inserted at the time the UIR is submitted/completed.

❗ If you want to print, do so before submitting this UIR.

IO UIR – Submit Confirmation



IDCFSUIR Logged on : testa : [Change Password](#) : [Logout](#)

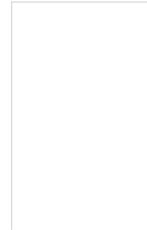
▶ Home ▶ Create UIR ▶ Search UIRs ▶ Reports Help

Submission Success

UIR has been submitted successfully. Please click on OK button to continue.



IO UIR – Search UIRs



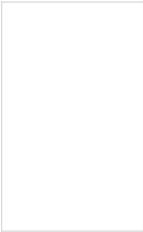
IDCFSUIR Logged on : testa : [Change Password](#) : [Logout](#)

▶ Home ▶ Create UIR ▶ Search UIRs Help

Search UIRs

DCFS CYCIS Case ID:	<input type="text"/>	UIR #:	<input type="text"/>
Provider ID:	<input type="text"/>	Status:	<input type="text" value="All statuses"/>
Last Name:	<input type="text"/>	First Name:	<input type="text"/>
Unit:	<input type="text"/>		
Date:	<input type="text" value="Incident Date"/>		
	<input type="text" value="-- select --"/>		

IO UIR – Search UIRs



Search UIRs

DCFS CYCIS Case ID: UIR #:

Provider ID: Status:

Last Name: First Name:

Unit:

Date:

Search Results

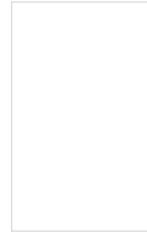
One item found.

<u>Last Name</u>	<u>First Name</u>	<u>DCFS CYCIS Case ID</u>	<u>UIR #</u>	<u>Incident Date</u>	<u>Involvement Code</u>	<u>Incident Type</u>	<u>RSF</u>
Smith	Alexis	<input type="text"/>	385959	06/24/2016 7:00 AM	CO	E01, J01	2A 08

Export options: CSV | Excel | PDF

HOME | RTOS | UIR | IA-CANS | CAYIT-CANS | CWS-CANS | FACILITY REPORTING | PROVIDER DATABASE | MESSAGE BOARD | ONLINE TRAINING | CONTACT |

IO UIR – Summary Page (top)



IDCFSUIR Logged on : testa : [Change Password](#) : [Logout](#)

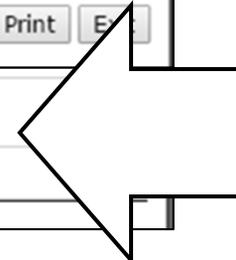
► Home ► Create UIR ► Search UIRs ► Reports Help

UIR Summary Page

CFS119 Draft Department of Children and Family Services Print
Unusual Incident Reporting Form

UIR #: 385959	Incident Date & Time: 06/24/2016 7:00 AM	UIR Status: Submitted to DCFS
---------------	---	----------------------------------

Summary Of The Incident:
Training

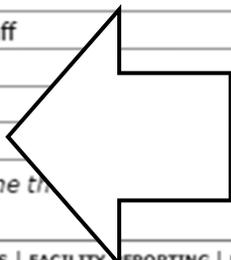


UIR Reporter Information:

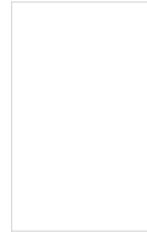
Reporter:	Smith, Kip
Title:	Other DCFS Staff
Phone:	217-854-2565
Reporter Agency:	
Date CFS119 Completed:	06/26/2016

This date is automatically inserted at the time the UIR is saved/completed.

HOME | RTOS | UIR | IA-CANS | CAYIT-CANS | CWS-CANS | FACILITY REPORTING | PROVIDER DATABASE | MESSAGE BOARD | ONLINE TRAINING | CONTACT |



IO – Other Features



IDCFSUIR

Logged on : testa : [Change Password](#) : [Logout](#)

▶ Home ▶ Create UIR ▶ Search UIRs ▶ Reports Help

Current UIRs

Listed below are UIR reports that are of current interest or may need your attention. By clicking on any of the items listed (name, CYCIS case ID, etc) you will be taken to the UIR. The line above gives you a choice of functions you may need to do, such as create a new UIR or search for a UIR not on the list below.

UIRs Not Submitted

UIRs may still be edited prior to final submission.

No UIRs found.

Last Name	First Name	DCFS	CYCIS Case ID	UIR #	Incident Date	Involvement Cod	st Type	RSF
Nothing found to display.								

For explanation of export options, please go to Help.

[HOME](#) | [RTOS](#) | [UIR](#) | [IA-CANS](#) | [CAYIT-CANS](#) | [CWS-CANS](#) | [FACILITY REPORTING](#) | [PROVIDER DATABASE](#) | [MESSAGE BOARD](#) | [ONLINE TRAINING](#) | [CONTACT](#) |



IO – Online Training

IDCFS

[HOME](#) | [RTOS](#) | [UIR](#) | [IA-CANS](#) | [CAYIT-CANS](#) | [CWS-CANS](#) | [FACILITY REPORTING](#) | [PROVIDER DATABASE](#) | [ONLINE TRAINING](#) |
[MESSAGE BOARD](#) | [CONTACT](#)

Welcome to the IL Outcomes Training Resources page. The links below provide training and usage information on IL Outcomes applications. If you have any questions or comments about these items, please email the DCFS OITS Helpdesk at Helpdesk.OITS@illinois.gov.

IL Outcomes Applications Access Request

- [IL Outcomes Applications Access Request Form](#)

UIR (Unusual Incident Reports)

- [Overview of the UIR Website](#)
- [Create a UIR for CO or CX involvement codes](#)
- [Completing Rule 384 Requirements](#)
- [Search & Edit a UIR](#)
- [Completing Party & Facilities page for the PL Involvement Code](#)
- [Help, UIRs](#)

- **[UIR Change Request Form](#)**

- o Use this form to change or delete a submitted UIR.
- o Download, data enter, and email this form to the DCFS OITS Helpdesk at Helpdesk.OITS@illinois.gov.

IDCFSUIR

IO UIR Demonstration



Feedback? Questions?



- ▶ What suggestions do you have about this process?

Assistance



- ▶ For further assistance or questions, email the OITS Help Desk:
Helpdesk.OITS@illinois.gov
- ▶ Specify whether you are referring to the NOMAD or IL Outcomes UIR system
- ▶ Always include the UIR #
- ▶ Always include the CYCIS ID of the youth