

User Guide for Health Care Worker Violence Report Tool

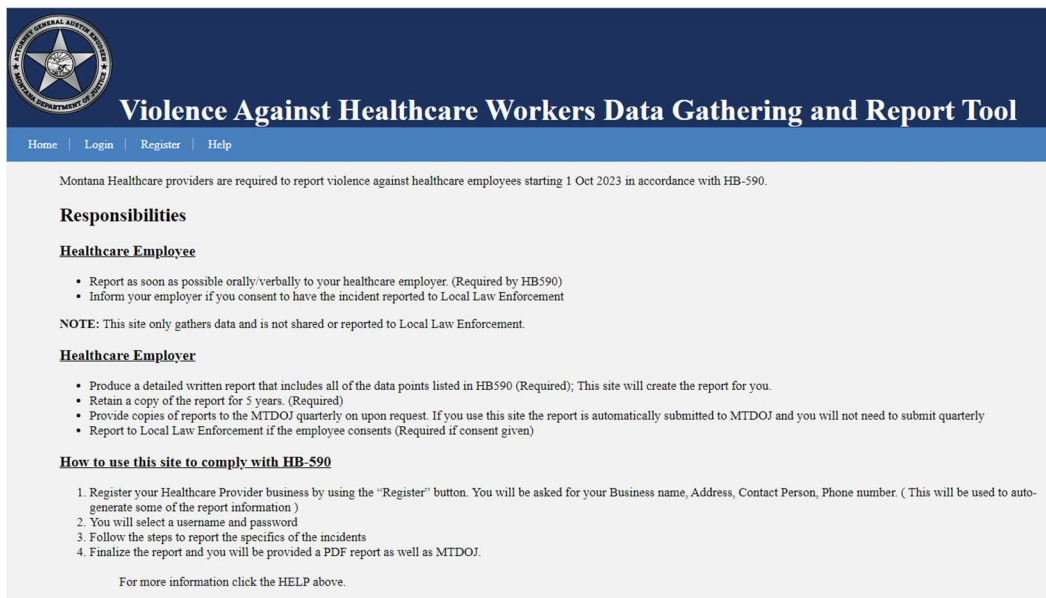
The link is:

<https://app.doj.mt.gov/apps/HB590/>

This tool will create a PDF report for your records.

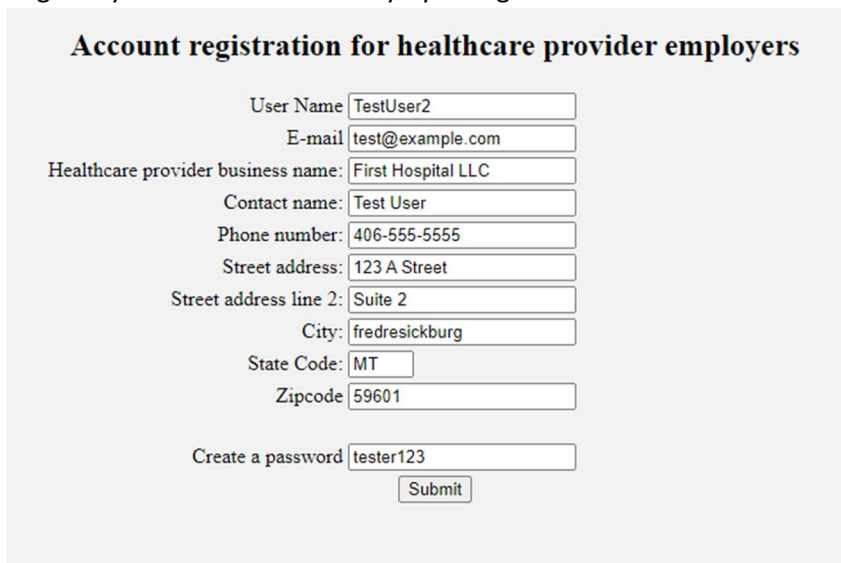
This tool will submit the report to the MT Dept of Justice.

If you use this tool you do not need to submit the reports quarterly as the MT DOJ already has them.



The screenshot shows the homepage of the "Violence Against Healthcare Workers Data Gathering and Report Tool". At the top left is the Montana Department of Justice logo. The title "Violence Against Healthcare Workers Data Gathering and Report Tool" is centered in a dark blue banner. Below the banner is a navigation menu with links for Home, Login, Register, and Help. The main content area includes a notice that Montana healthcare providers are required to report violence against healthcare employees starting 1 Oct 2023 in accordance with HB-590. It lists responsibilities for both Healthcare Employees and Healthcare Employers. Healthcare employees are required to report incidents verbally and in writing. Healthcare employers are required to produce a detailed written report, retain a copy for 5 years, and submit reports quarterly to the MTDOJ. A "How to use this site to comply with HB-590" section provides a four-step process: 1. Register your Healthcare Provider business, 2. Select a username and password, 3. Report the specifics of incidents, and 4. Finalize the report to receive a PDF. A "HELP" link is provided for more information.

Register your Health Care Facility by Filling in the Form and Submit



The screenshot shows a registration form titled "Account registration for healthcare provider employers". The form contains the following fields and values:

- User Name: TestUser2
- E-mail: test@example.com
- Healthcare provider business name: First Hospital LLC
- Contact name: Test User
- Phone number: 406-555-5555
- Street address: 123 A Street
- Street address line 2: Suite 2
- City: fredresickburg
- State Code: MT
- Zipcode: 59601
- Create a password: tester123

A "Submit" button is located at the bottom of the form.

Remember your Password!

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After you click Submit you will see the following information.
Click login to submit a report.

Account registration for healthcare provider employers

Thank you for registering your account.

You may now [login](#) with your username: TestUser4 to submit HB590 reports.

The Login Screen

Health Care Employer Login

User Name:

Password:

Login

[New user account?](#)

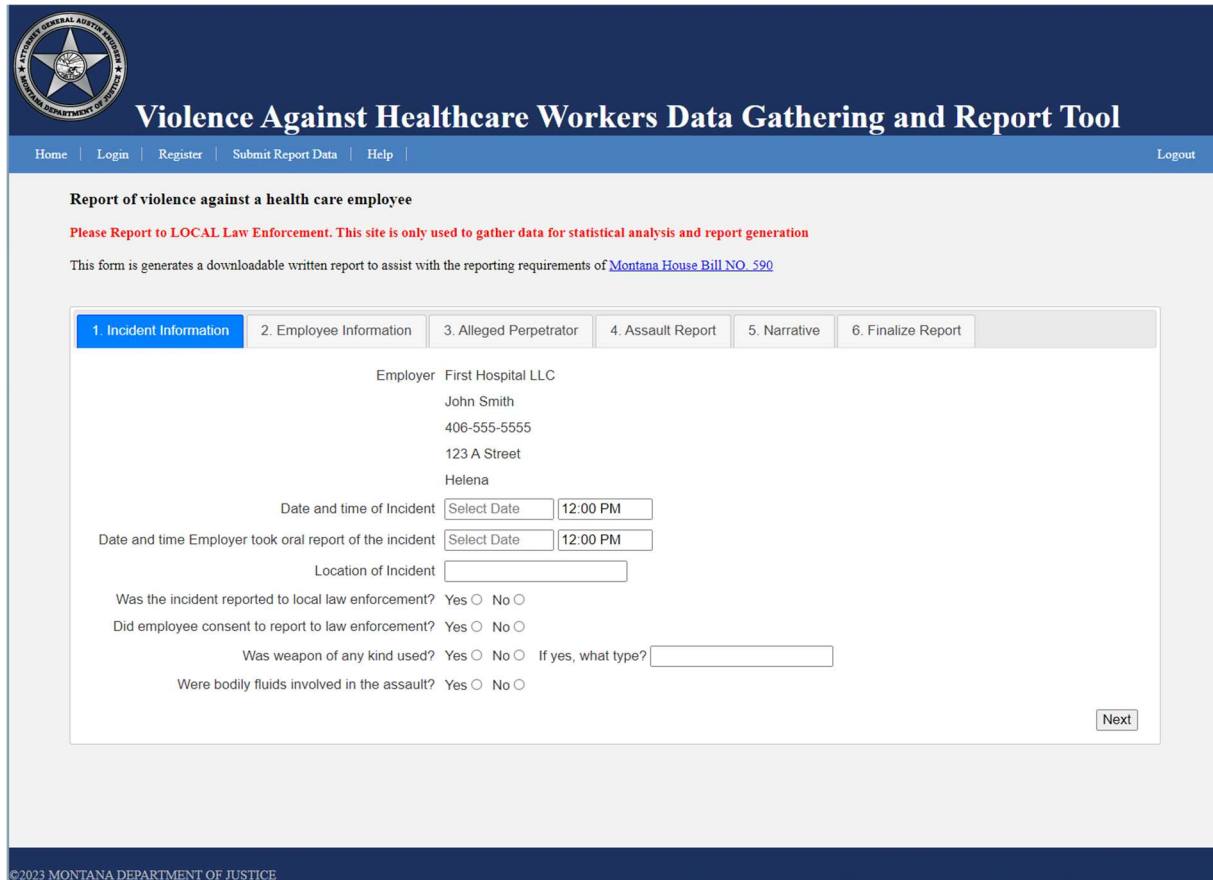
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Once Logged in you will see the following information.

Please enter all Required Data and as much optional information as possible.

There are 6 tabs of information. You can click the “Next” Button or Click on the tabs.

1. Incident Information



The screenshot shows the web interface for the "Violence Against Healthcare Workers Data Gathering and Report Tool". At the top left is the Montana Department of Justice logo. The title "Violence Against Healthcare Workers Data Gathering and Report Tool" is centered in a dark blue header. Below the header is a navigation bar with links for Home, Login, Register, Submit Report Data, Help, and Logout. The main content area is titled "Report of violence against a health care employee" and includes a red warning: "Please Report to LOCAL Law Enforcement. This site is only used to gather data for statistical analysis and report generation". A note states: "This form is generates a downloadable written report to assist with the reporting requirements of [Montana House Bill NO. 590](#)".

The form is divided into six tabs: 1. Incident Information (active), 2. Employee Information, 3. Alleged Perpetrator, 4. Assault Report, 5. Narrative, and 6. Finalize Report. The "Incident Information" tab contains the following fields:

- Employer: First Hospital LLC
- John Smith
- 406-555-5555
- 123 A Street
- Helena
- Date and time of Incident: Select Date, 12:00 PM
- Date and time Employer took oral report of the incident: Select Date, 12:00 PM
- Location of Incident: [Text Input]
- Was the incident reported to local law enforcement? Yes No
- Did employee consent to report to law enforcement? Yes No
- Was weapon of any kind used? Yes No If yes, what type? [Text Input]
- Were bodily fluids involved in the assault? Yes No

A "Next" button is located at the bottom right of the form area. The footer of the page reads "©2023 MONTANA DEPARTMENT OF JUSTICE".

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2. Employee Information

The screenshot shows the 'Employee Information' step of the reporting tool. The header includes the Montana Department of Justice logo and the title 'Violence Against Healthcare Workers Data Gathering and Report Tool'. A navigation bar contains links for Home, Login, Register, Submit Report Data, Help, and Logout. The main heading is 'Report of violence against a health care employee', followed by a note: 'Please Report to LOCAL Law Enforcement. This site is only used to gather data for statistical analysis and report generation'. Below this, it states 'This form is generates a downloadable written report to assist with the reporting requirements of Montana House Bill NO. 590'. A progress bar at the top shows six steps: 1. Incident Information, 2. Employee Information (highlighted), 3. Alleged Perpetrator, 4. Assault Report, 5. Narrative, and 6. Finalize Report. The form area contains the instruction 'Enter information about the employee who suffered an act of violence' and two notes: 'NOTE: Reports created in accordance with HB-590 are not considered protected health care information and must be retained by the health car employer SEPERATE and APART from employees medical record.' and 'NOTE: The Personally Identifiable Information (PII) collect here is used only to ensure data integrity for accurate summary annual reports. Privacy Policy Statement'. The form fields include: First Name, Last Name, Job Title, Phone #, Address, City, State (with 'MT' selected), and Zip. A 'Next' button is located at the bottom right. The footer reads '©2023 MONTANA DEPARTMENT OF JUSTICE'.

3. Alleged Perpetrator Information

The screenshot shows the 'Alleged Perpetrator' step of the reporting tool. The header and navigation bar are identical to the previous step. The main heading is 'Report of violence against a health care employee', followed by the same note: 'Please Report to LOCAL Law Enforcement. This site is only used to gather data for statistical analysis and report generation'. Below this, it states 'This form is generates a downloadable written report to assist with the reporting requirements of Montana House Bill NO. 590'. A progress bar at the top shows six steps: 1. Incident Information, 2. Employee Information, 3. Alleged Perpetrator (highlighted), 4. Assault Report, 5. Narrative, and 6. Finalize Report. The form area contains the instruction 'If known, Enter the alleged perpetrator's information below.' and the following fields: First Name, Last Name, Phone #, Address, City, State (with 'MT' selected), and Zip. Below these are three radio button options for Age: 'Under 18', 'Between 18 and 60', and 'Over 60'. A section titled 'Did the perpetrator appear to be...' contains four checkboxes: 'under the influence of alcohol', 'under the influence of any drugs (Legal or Illegal)', 'experiencing mental health issues', and 'in severe pain'. A 'Check All that apply' label is positioned to the left of these checkboxes. A 'Next' button is located at the bottom right. The footer reads '©2023 MONTANA DEPARTMENT OF JUSTICE'.

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4. Assault Report Information

Use the drop down menus to record injuries.

If there are fractures please record in the Fracture Bone section.

Clarify any injuries in the comments section as needed.

The screenshot shows the web application interface for reporting violence against healthcare workers. At the top left is the Montana Department of Health & Human Services logo. The main header is "Violence Against Healthcare Workers Data Gathering and Report Tool". Below the header is a navigation bar with links: Home, Login, Register, Submit Report Data, Help, and Logout. The main content area is titled "Report of violence against a health care employee" and includes a red warning: "Please Report to LOCAL Law Enforcement. This site is only used to gather data for statistical analysis and report generation". It also notes that the form generates a report for Montana House Bill NO. 590. A progress bar at the top of the form shows six steps: 1. Incident Information, 2. Employee Information, 3. Alleged Perpetrator, 4. Assault Report (selected), 5. Narrative, and 6. Finalize Report. Below the progress bar, instructions state: "Select each of the relevant tabs below and enter all violent acts that occurred." and "In the context of this report 'Act of violence' means an action in which a person intentionally or purposefully uses force that causes injury to another person or threatens to use force against a person that causes substantial fear of injury to the person." The form has two main sections: "Physical Injury(s)" and "Sexual Assault". The "Physical Injury(s)" section has a table with columns: Injury Type, Injury Location, and Comments. It includes a dropdown menu for Injury Type, a dropdown for Injury Location, and a text input for Comments. Below the table are "Add Injury" and "Remove Row" buttons. The "Fractures Bone" section has a table with columns: Fracture Type, Injury Location, and Comments. It includes a dropdown for Fracture Type, a dropdown for Injury Location, and a text input for Comments. Below the table are "Add Fracture" and "Remove Last Fracture" buttons. A "Next" button is located at the bottom right of the form.

1. Incident Information | 2. Employee Information | 3. Alleged Perpetrator | **4. Assault Report** | 5. Narrative | 6. Finalize Report

Select each of the relevant tabs below and enter all violent acts that occurred.

In the context of this report "Act of violence" means an action in which a person intentionally or purposefully uses force that causes injury to another person or threatens to use force against a person that causes substantial fear of injury to the person.

Physical Injury(s) | Sexual Assault

Injury Type	Injury Location	Comments
- Select -	- Select -	

Add Injury | Remove Row

Fractures Bone

Fracture Type	Injury Location	Comments
- Select Type -	- Select -	

Add Fracture | Remove Last Fracture

Next

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There is a secondary tab for Sexual Assault reporting.

The screenshot shows the 'Violence Against Healthcare Workers Data Gathering and Report Tool' interface. The header includes the Montana Department of Justice logo and navigation links: Home, Login, Register, Submit Report Data, Help, and Logout. The main heading is 'Report of violence against a health care employee'. Below this, a red note states: 'Please Report to LOCAL Law Enforcement. This site is only used to gather data for statistical analysis and report generation'. A link to 'Montana House Bill NO. 590' is provided. A progress bar at the top shows six steps: 1. Incident Information, 2. Employee Information, 3. Alleged Perpetrator, 4. Assault Report (selected), 5. Narrative, and 6. Finalize Report. The 'Assault Report' section contains instructions to select relevant tabs and enter violent acts. It defines 'Act of violence' as an intentional or purposeful use of force causing injury or fear. A table for 'Physical Injury(s)' is shown with columns for Type, Subtype, and Comments. The 'Sexual Assault' tab is active. The table has two dropdown menus for Type and Subtype, and a text input for Comments. Buttons for 'Add Injury', 'Remove Row', and 'Next' are present.

5. This is where you should enter a Narrative description of the incident.

The screenshot shows the 'Violence Against Healthcare Workers Data Gathering and Report Tool' interface, specifically the 'Narrative' tab. The header and navigation links are identical to the previous screenshot. The main heading is 'Report of violence against a health care employee'. A red note states: 'Please Report to LOCAL Law Enforcement. This site is only used to gather data for statistical analysis and report generation'. A link to 'Montana House Bill NO. 590' is provided. The progress bar at the top shows six steps: 1. Incident Information, 2. Employee Information, 3. Alleged Perpetrator, 4. Assault Report, 5. Narrative (selected), and 6. Finalize Report. The 'Narrative' section contains a large text area labeled 'Narrative description of the incident' for entering a detailed description of the incident. A 'Next' button is located at the bottom right of the text area.

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6. Enter the name of the person who prepared this report
Click the box certifying it is correct to the best of your knowledge
Click Submit.

The screenshot shows the 'Violence Against Healthcare Workers Data Gathering and Report Tool' interface. At the top left is the Montana Department of Justice logo. The title 'Violence Against Healthcare Workers Data Gathering and Report Tool' is centered in a dark blue header. Below the header is a navigation bar with links: Home, Login, Register, Submit Report Data, Help, and Logout. The main content area is titled 'Report of violence against a health care employee'. A red warning states: 'Please Report to LOCAL Law Enforcement. This site is only used to gather data for statistical analysis and report generation'. Below this, it says 'This form is generates a downloadable written report to assist with the reporting requirements of [Montana House Bill NO. 590](#)'. A progress bar at the top of the form shows six steps: 1. Incident Information, 2. Employee Information, 3. Alleged Perpetrator, 4. Assault Report, 5. Narrative, and 6. Finalize Report (which is currently selected and highlighted in blue). Below the progress bar, a paragraph explains: 'Once you click the Submit Report button a PDF Report will be generated. Please save or print and keep in your records (Separate and Apart from Employees Medical records) for 5 years. The report will have the date that the report must be retained for. All reports created here are automatically reported to the MTDOJ. (No quarterly report required if using this site. Reports can still be requested by the MTDOJ at will.)'. Below this text is a text input field labeled 'Name of Person who prepared this report'. Underneath the input field is a checkbox with the text 'I have verified that the information entered is correct and complete to the best of my knowledge.'. At the bottom center of the form is a 'Submit Report' button.

A PDF report will be generated for you.
Please Save and File(electronically or paper) as per your policies.
The report will have the retention dates provided.