DDSN Incident Management Reporting: Critical Incidents

Critical incidents occurring at DDSN Regional Center, DSN board facility, other service provider facility, or involves a participant in a DDSN Operated Home and Community-Based Waiver (regardless of residential location) shall be reported via Incident Management System (IMS). When determining whether a particular event should be considered a critical incident, the best guidance is "when in doubt, then report." The critical incident reporting system can screen out incidents reported as critical that later are judged to be non-critical by reviewers. The provider will receive correspondence stating why the incident was not considered "critical" and the incident will not be entered in the DDSN database.

Employee accidents/injuries and other incidents are managed as internal Human Resource matters, unless individuals supported by the agency are directly involved.

Site closures and events that affect the operation of a licensed facility may be reported to Licensing at licensing@ddsn.sc.gov, but will not be reported as Critical Incidents.

TYPES OF REPORTS

Initial Report

All critical incidents must be reported using IMS within 24 hours. A brief description of the incident must be included in the initial report. Basic details are required to ensure that any authorized reviewer would have a good understanding of the events, any parties involved, and any outside medical or law enforcement intervention. The current status at the time of report submission should always be included.

Final Report

An internal Administrative Review must be conducted for all critical incidents. Results of all reviews must be submitted to IMS within ten (10) calendar days of the incident or whenever staff first became aware of the incident.

Submission of the final report for residents of ICF/IID facilities or CFCF locations must be within five (5) calendar days of the incident to comply with DHEC requirements.

The report must contain the results of the review and will list recommendations to prevent or reduce where possible the recurrence of such incidents in the future. If any changes were made to the person's service plan, required supervision levels, or behavior support plan/guidelines, these changes must be indicated in the final report. If the changes are not completed by the time the final report is submitted, an addendum will be required. Human Rights Committee approval should also be documented if any changes are more restrictive. In addition, if any assessment was completed, (i.e., fall risk assessment, sexual risk assessment, etc.), the date of the assessment and the name and credentials of the individual completing the assessment should be documented in the final report (or addendum, as applicable). Any hospital discharge information should be summarized in the final report, or a copy of the report can be uploaded to the IMS. Law enforcement reports must be uploaded to the IMS. Additional information may be requested, as needed. The Facility Administrator/the Executive Director/CEO or their designee will review and submit the final report.

Addendum to Critical Incident Report

If the disposition of the critical incident review changes or additional information is discovered after the review, the Addendum to Critical Incident must be completed and submitted via IMS within 24 hours.

QUALITY ASSURANCE AND RISK MANAGEMENT

On a regular basis, DDSN quality management staff will review critical incidents, analyze data for trends, and recommend changes in policy, practice, or training that may reduce the risk of such events occurring in the future. Statewide trend data will be provided to DDSN Regional Centers, DSN boards and contracted service providers to enhance awareness activities as a prevention strategy.

Each DDSN Regional Center, DSN board or contracted service provider will also utilize their respective risk managers and Risk Management Committees to regularly review all critical incidents for trends and to determine if the recommendations made in the final written reports were implemented and are in effect.

NOTIFICATION PROCEDURES

Parent/Guardian or Primary Correspondent

Based on the contact information in the individual's plan, the parent/guardian or primary correspondent will be notified of the critical incident, as soon as possible, in the most expeditious manner possible and will be kept informed of the results of the management review to the extent possible, while maintaining confidentiality for all parties involved. Adult individuals who may legally consent may also choose not to disclose individual incidents. At least annually, the adult individual, with input from those important to him/her will specify who will be contacted should an incident occur. This information will be documented and readily available in the individual's file. Contact information for individuals under 18 years old will be updated in their plans annually and readily available. If the Case Manager/Qualified Intellectual Disability Professional/Early Interventionist is not the individual notifying the family, then DDSN will assure that the Case Manager/Qualified Intellectual Disability Professional/Early Interventionist is aware of the critical incident within two (2) working days of the incident, if applicable.

Law Enforcement

Facility Administrators/Executive Directors/CEO or their designee, should contact local law enforcement agencies directly when it is necessary to prevent further deterioration of the situation or when State or Federal laws may have been violated. They are encouraged to collaborate with Executive Staff at DDSN Central Office when in doubt about what external agencies should be notified.

Reporting Reasonable Suspicion of a Crime in ICF/IID Residences

Section 1150B of the Social Security Act, established by section 6703(b)(3) of the Affordable Care Act requires ICFs/IID to report any reasonable suspicion of a crime against a resident to at least one law enforcement agency and to DHEC - Bureau of Certification. In the case of Abuse, Neglect, or Exploitation, suspicion of a crime should be reported to the State Law Enforcement Division (SLED). Reasonable suspicion of any other crime should be reported to local law enforcement. The report should be made within two (2) hours if serious bodily injury occurred and within 24 hours for all other incidents. Notification can be made to the Department of Health and Environmental Control, Bureau of Health Facilities Licensing and Certification, 24 hours a day via DHEC's online Accident/Incident reporting module using this link: http://www.scdhec.gov/Apps/Health/AIReports/DefaultAIPublic.aspx or by fax to (803) 545-4212 (Licensing) and (803) 545-4292 (Certification) or by calling the 24-hour complaint line (800) 922-6735.

Notification of Department of Health and Environmental Control (DHEC) – Health Licensing Division

In cases where the incident involves a fire or serious injury to a resident of an ICF/IID, a report must be submitted to DHEC/Division of Health Licensing within 5 calendar days of the occurrence. A serious injury is

defined as, but not limited to, fractures of major limbs or joints, severe burns, severe lacerations, severe hematomas and suspected abuse. All reports are to be made via the following: http://www.scdhec.gov/Apps/Health/AIReports/DefaultAIPublic.aspx.

In CRCFs, a facility shall immediately report every serious accident and/or incident to the attending physician, next of kin or responsible party, and DDSN, by email or facsimile within 24 hours of the serious accident or incident. All 24-hour incident/accident reports should be emailed to BHFL@dhec.sc.gov or fax reports to (803) 545-4212. Serious accidents in a CRCF are defined as, but not limited to: crimes against residents, confirmed or suspected cases of ANE, medication errors with adverse reactions, hospitalization as a result of the accident/incident, severe hematoma, laceration or burn requiring medical attention or hospitalization, fracture of bone or joint, severe injury involving use of restraints, attempted suicide, or fire.

Media Contacts

All contacts with the media concerning critical incidents in DDSN Regional Centers should be coordinated through the State Director who shall determine the most appropriate response. Media contacts at provider agencies are to be managed by the Executive Director/Chief Executive Officer or designee with notification to DDSN Executive Staff.