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Applicability: DDSN Regional Centers, DSN Boards, and Contracted Service Providers **(NEW)**

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## **PURPOSE**

The purpose of this directive is to establish a definition for adverse operational events and to outline a reporting, tracking, and feedback system in order to:

- a) Provide for a coordinated, internal review of the event,
- b) Ensure appropriate action was taken, and
- c) Recommend appropriate measures to reduce the risk of such events occurring in the future where possible.

These procedures are outlined as minimum requirements in meeting the needs of consumers and to enable DDSN Regional Centers, DSN Boards and Contracted Service Providers the guidance necessary to support life, safety and accountability efforts within these settings and/or during the provision of DDSN contracted services.

### **DISTRICT I**

P.O. Box 239  
Clinton, SC 29325-5328  
Phone: (864) 938-3497

Midlands Center - Phone: 803/935-7500  
Whitten Center - Phone: 864/833-2733

9995 Miles Jamison Road  
Summerville, SC 29485  
Phone: 843/832-5576

### **DISTRICT II**

Coastal Center - Phone: 843/873-5750  
Pee Dee Center - Phone: 843/664-2600  
Saleeby Center - Phone: 843/332-4104

**DEFINITION OF ADVERSE OPERATIONAL EVENTS**

An adverse operational event is an unusual, unfavorable occurrence that is not specific to individual DDSN Service recipients and:

- a) Not consistent with routine operations;
- b) Has harmful or otherwise negative effects involving individuals with disabilities, employees, or property;
- c) Occurs in a DDSN Regional Center, DSN board facility, other service provider facility, or during the direct provision of other DDSN funded services; and
- d) Does not meet the criteria to be considered a critical incident as defined in the Critical Incident Reporting directive (100-09-DD).

Examples of adverse operational events include, *but are not limited to*, the following October 1, 2017:

1. Provider Conduct violation	Possession of any firearms or weapons while working or on the premises of any DDSN contracted service location or possession or use of any illegal substance or intoxication while working or on the premises of any DDSN contracted service location.
2. Medicaid Fraud	Any report of alleged billing for services that were not provided. *Also requires a report to the State Attorney General’s Office-Medicaid Fraud Control Unit.
3. Hazardous Event	Any report of a fire, natural disaster, or a hazardous contamination of any provider agency facility or vehicle (where vehicle damages exceed \$2,500).
4. Theft or misuse of agency funds	Any known or justifiably suspected theft or misuse of agency funds/property or private funds/property by anyone (staff, individual or someone in the community), that have an impact on the facility or program operations. Situations involving suspected theft, misuse, or exploitation of individual funds must be reported under DDSN Directive 534-02-DD: Procedures for Preventing and Reporting Abuse, Neglect, or Exploitation of People Receiving Services from DDSN or a Contracted Provider Agency, unless the incident appears to be random in nature (e.g., the individual was in the community and was not targeted due to perceived disability)
5. Public Interest/Sensitive Situations	Other situations judged to be unusually significant or of high public interest.

**REPORTING PROCESSES**

Adverse Operational Events occurring at DDSN Regional Centers, DSN Board facilities, other service provider locations, or while an individual is under the supervision of staff or a contracted

employee from any aforementioned provider, shall be reported to the Director-Division of Quality Management via Incident Management System (IMS) on the DDSN Portal. In the event of a power or Internet service outage, the provider may submit a paper summary of the adverse event, but the provider will be responsible for completing a report on IMS as soon as possible.

When determining whether a particular event should be considered an Adverse Operational Event, the best guidance is “when in doubt, then report.” The reporting system is able to screen out events that do not meet DDSN’s criteria for reporting. In this case, the provider will receive correspondence stating why the event did not meet the criteria and should not be entered into the DDSN database. If the provider indicates that they want the report to remain in the system, DDSN will accept it. If the report is accepted, all reporting requirements will apply.

Reporting employee actions as adverse operational events does not remove the responsibility of the board/provider/DDSN Regional Center to follow appropriate Human Resources practices, such as also reporting the incident to the workers compensation insurance carrier or in making required reports to other state or local agencies.

## **TYPES OF REPORTS**

### **A. Verbal Report**

If an adverse operational event is of such a serious nature that, in the judgment of program managers, the incident should be reported immediately, then the Facility Administrator/Executive Director/CEO or designee, shall notify the Associate State Director for Operations by telephone or if unavailable through one of the District Directors or designee. Most adverse operational events do not require a verbal report.

### **B. Written Report**

#### **1. Initial Report**

All adverse operational events are to be reported using IMS within 24 hours or the next business day.

A brief description of the event is to be included in the initial report. Basic details should be provided 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.

#### **2. Final Report**

An internal management review will be conducted of all adverse operational events. Results of all reviews must be submitted on IMS within ten (10) working days of the incident or whenever staff first became aware of the event.

Submission of the final report for consumers residing in ICF/IID facilities must be within five (5) working days of the incident to comply with DHEC requirements. The report will contain the results of the review and will list recommendations to prevent or reduce where possible the recurrence of such events in the future. 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.

3. Addendum

If the disposition of the Adverse Operational Event changes or additional information is discovered after the review, an Addendum must be completed and submitted via IMS within 24 hours or the next business day of the change.

### **QUALITY ASSURANCE and RISK MANAGEMENT**

On a regular basis, DDSN quality management staff will review Adverse Operational Events, 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. In each case, there may be an opportunity to learn from the incident in an effort to develop additional risk management and prevention strategies.

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 adverse events for trends and to determine if the recommendations made in the final written reports were actually implemented and are in effect.

### **PROCEDURES FOR NOTIFICATION OF:**

#### **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 the District Director or designee or 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 consumer residing in an ICF, a report must be submitted to DHEC/Division of Health Licensing within 10 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>.

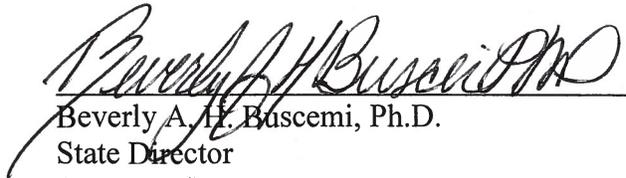
In CRCFs, a facility shall immediately report every serious accident and/or incident to the attending physician, next of kin or responsible party, and DDSN, by email or facsimile within 24 hours of the serious accident or incident. All 24 hour incident/accident reports to should be emailed to [BHFL@dhec.sc.gov](mailto:BHFL@dhec.sc.gov) 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 adverse operational events in DDSN Regional Centers should be coordinated through the State Director who shall determine the most appropriate response. Media contacts at the DSN board/provider organization are to be handled by the Executive Director or designee with notification to the appropriate District Director or designee of such contacts.



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Susan Kreh Beck, Ed.S., NCSP  
Associate State Director-Policy  
(Originator)



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Beverly A. Buscemi, Ph.D.  
State Director  
(Approved)

***To access the following attachments, please see the agency website page “Attachments to Directives” under this directive number at <http://www.ddsn.sc.gov/about/directives-standards/Pages/AttachmentstoDirectives.aspx>.***

Attachment A: Reporting to DHEC Bureau of Certification as applicable to ICF/IID  
Attachment B: Reporting to DHEC Health Regulations-Division of Health Provider

Related Directives:

100-0-DD: Critical Incident Reporting  
100-26-DD: Risk Management Program  
100-28-DD: Quality Management