



EHR DSP CORE Training Incident Reporting

EHR DSP CORE Training

Incident Reporting

Written Documentation

Take a moment and answer the following questions:

1. Why is documentation important?
2. When do you think you would need to complete documentation?
3. What things/situations regarding health and safety do you think you should document?
4. How would written documentation help reduce the possibility of legal liability?

EHR DSP CORE Training

Incident Reporting

TYPES OF INCIDENTS

An incident is an event or occurrence that could potentially impact the health and well-being of an individual, his/her relatives, the State of Arizona, the service provider or the community.



EHR DSP CORE Training

Incident Reporting

This could include situations that may be considered news-worthy and/or incur liability to the State of Arizona or Echoing Hope Ranch. An incident is **anything** that could negatively impact the person, the provider or the Division. **Incidents MUST be reported.**



EHR DSP CORE Training

Incident Reporting

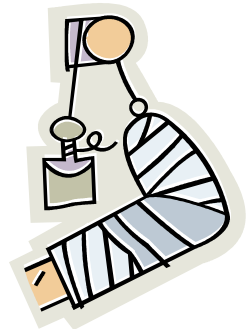
Some incidents are considered “serious” incidents and have a higher reporting priority. EHR’s incident reporting protocol covers ALL notification timeframes so *as long as you follow procedure*, the category an incident falls into really doesn’t matter to you, the DSP.

EHR DSP CORE Training

Incident Reporting

What would you consider an incident?

- Death of an individual known to have a terminal condition
- Potentially dangerous situations due to neglect of an individual
- Allegations of suspected sexual, physical, programmatic, or verbal/emotional abuse.
- A missing individual. (call 911 after 15 minutes of searching unless ISP states otherwise)
- Accidental injuries that may or may not result in medical intervention.
- Violation of an individual's rights.



EHR DSP CORE Training

Incident Reporting

- Fraud (for example: falsifying timesheets or the person/family served claiming a condition or need that doesn't exist to gain additional services).
- Complaints about a group home or someone who lives in a group home.
- Allegations of inappropriate sexual behavior.
- Circumstances that pose a threat to the health, safety or welfare of individuals, such as loss of air conditioning, loss of water or loss of electricity.

EHR DSP CORE Training

Incident Reporting

- Use of behavior management techniques that are not part of a behavior treatment plan. (This will be explained in your Article 9 training)
- Theft or loss of an individual's money or property.
- The use of emergency measures as defined by Article 9. (Emergency Physical intervention techniques employed in an emergency to manage a sudden, intense, or out-of-control behavior where harm is imminent)

EHR DSP CORE Training

Incident Reporting

- Problems with medications.
(I.e. Side effects or medication errors, etc.)
- Community disturbances in which the individual or the public may have been placed at risk.
- Serious work related illness or injury.
- Threats to Division or provider employees or property and non-consumer/non-employee accidents that occur on state or provider property.



EHR DSP CORE Training

Incident Reporting

- **Unplanned** hospitalization or emergency room visit in response to an illness, injury, or medication error.
- Unusual weather conditions or other disasters resulting in an emergency change of operations.
- Provider drug use.



EHR DSP CORE Training

Incident Reporting

Serious incidents

Serious incidents require immediate notification to the Division of Developmental Disabilities (DDD). The Division interprets “immediately” as the first allowable opportunity that does not place the consumer or staff at undue risk, as applicable to the situation. Notification must occur by the agency to the Division and responsible person within 24 hours of the incident.

EHR DSP CORE Training

Incident Reporting

However, because there is internal processing that must occur to your report prior to its submission, you have two hours from offset (once the incident is done and the individual is safe) to submit your incident report.

EHR DSP CORE Training

Incident Reporting

Serious incidents could include, but are not limited to:

- All sudden deaths (e.g. car accident, etc.)
- All suspected allegations of abuse and neglect.
- Any situation that poses a serious and immediate threat to the physical or emotional well-being of an individual or staff member.

EHR DSP CORE Training

Incident Reporting

- Severe personal injury – a physical injury that creates a reasonable risk of death, causes serious or permanent disfigurement or causes serious impairment of a consumer's health.
- A situation in which a person, who cannot be unsupervised at home or in the community, runs away or is missing.
- Property damage estimated in excess of \$10,000.

EHR DSP CORE Training

Incident Reporting

- A situation that involves the theft or loss of an individual's money or property of more than \$1000.
- A situation that involves reporting to law enforcement officials because a Division-enrolled individual is missing and presumed to be in imminent danger.
- A situation that involves reporting to law enforcement officials due to possession and/or illegal substance use by individuals or staff/providers.

EHR DSP CORE Training

Incident Reporting

- A situation that results in a 911 call due to a suicide attempt by an individual.
- A situation that involves an incident or complaint from the community that will be or is reported on the front pages of the newspaper or on television/radio.



Regardless whether or not you see your situation listed here, **If in doubt, fill it out!**

EHR DSP CORE Training

Incident Reporting

Incident Reporting

Basics: The purpose of incident reporting

- A communication tool
- A way to protect the DSP



An incident report protects you, the DSP, EHR and the state of AZ by ensuring that all responses to an incident are documented.

EHR DSP CORE Training

Incident Reporting

- A way to promote health and safety
An incident report ensures that issues are addressed that could negatively affect the person.



EHR DSP CORE Training

Incident Reporting

- A method for gathering trending data

Incident reporting helps the family and team to see patterns and provides a record of incidents and occurrences. This may benefit the family and team in addressing triggers or patterns of problems that have occurred.



EHR DSP CORE Training

Incident Reporting

- A way to reduce the likelihood of recurrence

It allows the family and team to address problem areas.

For example, if a person is hitting their shins as they get out of bed, causing injury and pain, an incident report will let everyone know that there is a problem with the bed or bedroom set up so that it can be changed.

EHR DSP CORE Training

Incident Reporting

- A way to provide communication between responsible parties, the Division of Developmental Disabilities, EHR and you, the DSP.
- A tool to report on issues of concern that need follow-up. Without an incident report, the people who are in a position to make a difference may not know all the information they need to take action. The incident report allows EHR, the State of Arizona, and the responsible person and family (when appropriate) to take the steps needed to resolve a problem or issue.

EHR DSP CORE Training

Incident Reporting

Steps to take when an incident occurs

"When in doubt, fill it out."

In the event of a situation that could be considered an incident, follow these steps:

- First and foremost, take whatever actions are necessary to resolve any emergencies and ensure the health and safety of any individuals involved. This may include calling 911 or taking other emergency actions.

EHR DSP CORE Training

Incident Reporting

For incidents:

- Complete a written report of the incident as soon as possible, but no more than two hours after offset (when the incident is done and the individual is once again safe).
- EHR must provide the written report to the District (DES/DDD) within 24 hours.
- A copy of the report must also be sent to the responsible person if there is one.



EHR DSP CORE Training

Incident Reporting

For serious incidents

- Complete a written report of the serious incident as soon as possible, again within 2 hours of offset of incident.
- EHR must provide a verbal and written report to the Division as well as any applicable responsible parties within 24 hours.

So as you can see, the protocol is exactly the same as with an incident.

EHR DSP CORE Training

Incident Reporting

- The responsible person may be a guardian or family member. The responsible person must be notified unless it has been otherwise specified in the Individual Support Plan (ISP). Your EHR Supervisor will make this notification, or it may be made by the DES/DDD Support Coordinator. If you are in contact with that individual before your supervisor (the responsible person is who relieved you) communicate to them what occurred and document that contact on your report.

EHR DSP CORE Training

Incident Reporting

Reporting emergency physical intervention techniques

When an emergency physical intervention technique is employed to manage a sudden, intense and out-of-control behavior where harm is imminent the person employing the technique must:

- Immediately report the circumstances of the technique to DES/DDD and the responsible person by accomplishing an incident report following the same protocol as with an incident or serious incident.

EHR DSP CORE Training

Incident Reporting

In your report of an emergency physical intervention technique you will want to include the following information:

- All interventions used before the emergency physical intervention technique was implemented.
- A statement of how the individual's behavior presented imminent danger (injury to self, others or severe property damage) that caused imminent harm.

EHR DSP CORE Training

Incident Reporting

- That the behavior showed continuance, or a likelihood of continuing (the intensity was going to continue if you did not intervene).
- Information regarding any injuries that may have occurred and care steps taken to care for those injuries.

EHR DSP CORE Training

Incident Reporting

When completing an incident, serious incident or an incident report due to the utilization of an emergency physical intervention technique, your report must be:

- Completed in blue or black ink.
- Corrected accurately.
 - o If you make an error, draw a single line through the error and next to the error, chart your initials and the date the change was made.
 - o Never scribble out an error.
 - o Never use correction fluid or tape on any form of documentation to include an incident report form.
 - o Never erase anything on an incident report.

EHR DSP CORE Training

Incident Reporting

- Written clearly, objectively and in the order of occurrence, without reference to the writer's opinion.

Keep in mind that these reports are available to family/guardians and are considered legal documents. "Objective" means you state **facts**, not opinions.



EHR DSP CORE Training

Incident Reporting

- **A Good Example:**

Music was playing on the radio in the living room. Sally came out of her room and made the statement "the music is bothering me. Please turn it off."

- **A BAD Example:**

Sally came storming out of her room because she didn't like the song that was playing on the radio and demanded that I turn it off. She was really mad.

EHR DSP CORE Training

Incident Reporting

All incident reports:

- Include demographic information like:
 - o Full name
 - o Address
 - o Date of birth
 - o ASSIST or Focus Identification number as found on the coversheet of the Individual's annual ISP

EHR DSP CORE Training

Incident Reporting

Include the names and titles of all DSPs who witnessed the incident or were involved in it.

Include a full description of the incident in the order that it occurred:

1. What happened **BEFORE**-What were all the circumstances that lead up to the actual incident itself?
2. What happened **DURING**-Describe the actual 'incident' itself. Be as comprehensive, yet succinct as possible. Do **NOT** include judgment or opinion.
3. **HOW** did the incident get resolved-What did YOU do e.g. first aid or implement positive behavior support techniques e.g. redirection, etc.?

EHR DSP CORE Training

Incident Reporting

4. What happened with the individual **AFTER** the incident-Did they resume their typical routine? Did they take a 30 minute nap and *then* resumed their typical routine? Did they end up in the E.R. and subsequently were admitted into the hospital, etc.?
5. **WHAT** did you do to ensure they remained okay and safe the rest of your shift-Did you monitor them for further adverse reactions? Did you remain within arm's reach of them the rest of the shift to ensure they remained safe, etc.?
6. **WHO** did you tell about the incident-This should be whoever relieved you. This is important so that the reader of the report knows that continued monitoring occurred after you left and by whom, "Once (insert name)'s mother returned, I reported to them the details of the incident to include any on-going monitoring needs", etc.

EHR DSP CORE Training

Incident Reporting

- Include causes of injury (if applicable).
- In the notification section, document if you notified the responsible person. If not, leave all notification information for that individual blank so that your supervisor can fill that in once they do.
- Include any law enforcement, Adult/Child Protective Services, or Tribal Social Services contact.
- Include your signature and name as the person completing the report.

EHR DSP CORE Training

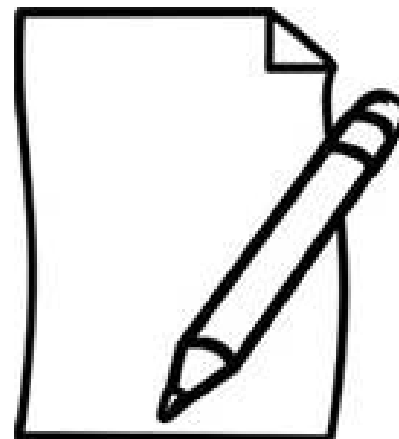
Incident Reporting

- Must be completed for each individual involved in the incident and not breach the confidentiality of other individuals. If there is a need to refer to another individual to make the narrative of the incident make sense, use that person's role to distinguish them (I.e. housemate, brother, parent, etc.)
- Must be maintained by EHR and the Division of Developmental Disabilities Support Coordinator.

EHR DSP CORE Training

Incident Reporting

If more than one individual who receives services through the Division of Developmental Disabilities is involved in the incident, write a separate report for each person. Use only the individual's name for which the report is being written. Again, refer to other persons generically, e.g. housemate, roommate, peer, friend, etc.



INCIDENT REPORT

*Confidential Information***Please Print**

- Division staff may use this form to ensure all pertinent incident information is gathered.
- Providers may use this form or write all pertinent incident information on a separate report to the Division.

INDIVIDUAL'S NAME (Last, First, M.I.)		FOCUS ID NO.	BIRTHDATE
INDIVIDUAL'S ADDRESS (No., Street, City, State, ZIP)		FOSTER CARE <input type="checkbox"/> Yes <input type="checkbox"/> No	
PROVIDER NAME AT TIME OF INCIDENT (Qualified Vendor, Individual Independent Provider, Provider Site Name)			
NAME AND LOCATION OF INCIDENT (Site Name, No., Street, City, State, ZIP)		DATE OF INCIDENT	TIME OF INCIDENT <input type="checkbox"/> PM <input type="checkbox"/> AM
STAFF/WITNESS(ES) INVOLVED IN INCIDENT (Last, First, M.I.)	PHONE NUMBER	IMMEDIATE SUPERVISOR	
1. _____	(____) _____	_____ <input type="checkbox"/> N/A	
2. _____	(____) _____	_____ <input type="checkbox"/> N/A	

DESCRIBE INCIDENT THOROUGHLY. (What happened before, during and after the incident. Include all known facts, causes of injury and emergency measures, if applicable. Write clearly, objectively and in order of occurrence, without reference to the writer's opinion.)

WHAT HAPPENED BEFORE THE INCIDENT?

WHAT HAPPENED DURING THE INCIDENT?

WHAT COULD HAVE PREVENTED THE INCIDENT?

DC-191-FF (2-11) - PAGE 2

INDIVIDUAL'S NAME (Last, First, M.I.) [REDACTED]	DATE OF INCIDENT [REDACTED]
TYPE OF MEDICAL INTERVENTION (Doctors visit, urgent care, emergency room, hospitalization) [REDACTED]	
LOCATION OF MEDICAL INTERVENTION (Site location and address) [REDACTED]	

NOTIFICATIONS

Serious incidents, as described in the Division's Policy and Procedures Manual Administrative Directive 76, are to be reported and written as soon as possible, but no later than 24 hours after the incident.

All other incidents, as described in the Directive, must be reported to the District office by the close of the next business day following the incident.

PARENT/GUARDIAN NOTIFIED (If Yes, name of person notified. If No, explain why)	NOTIFIED BY WHOM (Last, First, M.I.)	DATE/TIME OF NOTIFICATION
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A [REDACTED]	[REDACTED]	[REDACTED] [REDACTED] <input type="checkbox"/> AM <input type="checkbox"/> PM
SUPPORT COORDINATOR NOTIFIED	[REDACTED]	[REDACTED] [REDACTED] <input type="checkbox"/> AM <input type="checkbox"/> PM
CHILD/ADULT PROTECTIVE SERVICES NOTIFIED	[REDACTED]	[REDACTED] [REDACTED] <input type="checkbox"/> AM <input type="checkbox"/> PM
TRIBAL SOCIAL SERVICES NOTIFIED	[REDACTED]	[REDACTED] [REDACTED] <input type="checkbox"/> AM <input type="checkbox"/> PM
POLICE NOTIFIED	[REDACTED]	[REDACTED] [REDACTED] <input type="checkbox"/> AM <input type="checkbox"/> PM
PRINT NAME OF PERSON COMPLETING THIS FORM [REDACTED]	SIGNATURE OF PERSON COMPLETING FORM [REDACTED]	DATE [REDACTED]

CORRECTIVE ACTION/COMMENTS

WHAT STEPS ARE BEING TAKEN TO PREVENT THIS FROM HAPPENING AGAIN?
[REDACTED]

PRINT SUPERVISOR'S NAME [REDACTED]	SIGNATURE OF SUPERVISOR [REDACTED]	DATE [REDACTED]
---------------------------------------	---------------------------------------	--------------------

Equal Opportunity Employer/Program • Under Titles VI and VII of the Civil Rights Act of 1964 (Title VI & VII), and the Americans with Disabilities Act of 1990 (ADA), Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and Title II of the Genetic Information Nondiscrimination Act (GINA) of 2008; the Department prohibits discrimination in admissions, programs, services, activities, or employment based on race, color, religion, sex, national origin, age, disability, genetics and retaliation. The Department must make a reasonable accommodation to allow a person with a disability to take part in a program, service or activity. For example, this means if necessary, the Department must provide sign language interpreters for people who are deaf, a wheelchair accessible location, or enlarged print materials. It also means that the Department will take any other reasonable action that allows you to take part in and understand a program or activity, including making reasonable changes to an activity. If you believe that you will not be

EHR DSP CORE Training

Incident Reporting

REPORTING EMERGENCY PHYSICAL INTERVENTION TECHNIQUES

Definition of an "Emergency Physical Intervention Technique": In the event that an individual engages in a sudden, intense, out of control behavior endangering the health or safety of the individual or another person, the use of emergency physical intervention techniques and/or behavior modifying medication with a physician's order for specific one time emergency use.

EHR DSP CORE Training

Incident Reporting

The team must meet and consider writing a behavior plan when an emergency physical intervention technique is used two or more times in any 30 day period or has any identifiable pattern.

Support your individual by notifying your supervisor as soon as you know the person you serve has reached this threshold. The team **MUST** explore *what*, outside of emergency physical intervention techniques can be put in place to address the issue that warrants those measures to begin with.

EHR DSP CORE Training

Incident Reporting

Emergency Physical Intervention Techniques:

If the individual has a BTP (behavior treatment plan) and the preventative strategies and/or positive teaching strategies or techniques you use outside of a BTP are ineffective, DSPs shall use the least amount of intervention necessary to safely physically manage the individual's out-of-control behavior. If the intensity of the behavior requires the DSP to revert to an emergency, physical intervention technique, they shall be:

EHR DSP CORE Training

Incident Reporting

- Used only by individuals specifically trained in the use of a Prevention and Support (previously known as Client Intervention training) techniques
- Used only when less restrictive methods were unsuccessful or inappropriate
- Used to prevent the individual from harming him or herself or others or causing severe damage to property
- Continued only while there is still a behavioral emergency
- Be used concurrently with the uncontrolled behavior
- Be appropriate to the situation to insure safety

EHR DSP CORE Training

Incident Reporting

DSPs must ask themselves these questions every time PRIOR to using an emergency physical intervention technique:

1. RIGHT NOW is the individual in danger?
2. RIGHT NOW is anyone else in danger?
3. RIGHT NOW is property damage occurring so severe that someone is in danger?

Then and ONLY then would the least intrusive emergency physical intervention technique be appropriate!

EHR DSP CORE Training

Incident Reporting

Reporting Procedures:

When an emergency physical intervention technique is employed to manage a sudden, intense out of control behavior, the person employing that measure shall:

- Write the emergency measure report within 2 hours of offset (the behavioral emergency subsides)
- Notify your Supervisor