

POLICY AND PROCEDURE PERTAINING TO REVIEWING OF INCIDENTS AND EMERGENCIES

PURPOSE

The purpose of this policy is to provide instructions and guidelines for the internal review of incidents and emergencies.

POLICY

EON, Inc. is committed to the prevention of and safe and timely response to incidents and emergencies. Staff will act immediately to respond to incidents and emergencies as directed in the *Incidents Response and Reporting Policy and Procedure* and the *Emergency Response and Reporting Policy and Procedure*. After the health and safety of person(s) served are ensured, staff will complete all required documentation that will be compiled and used as part of the internal review process. The company will ensure timely completion of the internal review procedure of incident and emergencies to identify trends or patterns and corrective action, if needed.

PROCEDURE

I. The Community Supports Supervisor (CSS) or designee will review the *General Event Report (GER)* or *Accident Incident Report* for thorough completion, assure notifications have been/are made and determine whether the person's *Support Plan (SP)*, *Support Plan Addendum (SPA)*, and/or policies and procedures were implemented as applicable.

A. Each *GER* or *Accident Incident Report* will include:

1. The name of the person or persons involved in the incident;
2. The date, time, and location of the incident;
3. A description of the incident;
4. A description of the response to the incident and whether a person's coordinated service and support plan addendum or program policies and procedures were implemented as applicable;
5. The name of the staff person or persons who responded to the incident; and
6. The determination of whether corrective action is necessary based on the results of the review, which will be completed by the CSS or designee.

B. The report(s) will then be forwarded to the CSD or designee.

II. Conducting an Internal Review of a Serious Injury

A. If there was a serious injury, the CSS or designee will:

1. Ensure the GER is clear, concise, and completed thoroughly.
2. Notify the following individuals or entities immediately (within 24 hours) of the serious injury, or receipt of information that the death occurred, unless EON, Inc. has reason to know that the serious injury has already been reported:
 - a. Legal representative or designated emergency contact;
 - b. Case manager;
 - c. Other support team members as listed on the person's *Emergency Notification Form*;
 - d. Minnesota Office of the Ombudsman for Mental Health and Developmental Disabilities and the Department of Human Services (DHS) Licensing Division using the required

- e. reporting forms below, unless EON, Inc. has reason to know the death has already been reported;
- f. *Serious Injury Report Reporting Form*, and
- g. *Death or Serious Injury Report Fax Transmission Cover Sheet*.
 - i. *Death Report and the Death and Serious Injury Fax Cover Sheet* shall be completed and faxed to both the Office of the Ombudsman and DHS using the fax cover sheet.
 - ii. Intermediate Care Facility (ICF). When a death occurs in a facility certified as an ICF for persons with developmental disabilities, the death or serious injury must be reported to the DHS, Office of Health Facility Complaints, and the Office of Ombudsman for Mental Health and Developmental Disabilities.
 - iii. *Death Report and the Death and Serious Injury Fax Cover Sheet* shall be completed and faxed to DHS, Office of Health Facility Complaints, and the Office of the Ombudsman using the fax cover sheet.

III. Conducting an internal review of Death of Person Served

Follow the *Death of Person Served Policy and Procedure*.

IV. Conducting an internal review of maltreatment

Follow the *Reporting and Review of Maltreatment of Vulnerable Adults* or *Reporting and Review of Maltreatment of Minors*.

V. Conducting a review of emergency use of manual restraints (EUMR)

Follow the *EUMR and Positive Support Strategies Policy and Procedures*.

VI. The CSD or designee completes an internal review of all incidents and emergencies to identify trends or patterns and determine if corrective action is needed to reduce occurrences within 30 days.

A. The internal review will address the following:

1. Were related policies and procedures followed?
2. Were the policies and procedures adequate?
3. Is there a need for additional staff training?
4. Is the incident or emergency similar to past events with the person or services involved?
If yes, identify the patterns, if any.
5. Is there a need for corrective action by the program to protect the health and safety of the persons receiving services and to reduce future occurrences?

If yes, identify the corrective action plan designed to correct current lapses and prevent future lapses in performance by staff or the program. Include applicable implementation dates, staff assigned to take the corrective action and attach relevant documentation.

- B. A copy of the *GER* or *Accident Incident Report* will be forwarded to the legal representative, case manager, other license holders (i.e. Enterprise North, MRCI) and any involved licensing bodies as required. All reports of incidents or emergencies will be maintained in a central location.

- C. Based on the results of the internal review, EON, Inc. will develop, document, and implement a corrective action plan designed to correct current lapses and prevent future lapses in performance by staff or EON, Inc., if any.
- D. The internal review of all incidents of EUMR must be completed according to the requirements in EON, Inc.'s *EUMR policy*.
- E. EON, Inc. will make internal reviews accessible to the commissioner immediately upon the commissioner's request.

VII. Record Keeping Procedures

Uniform and legible reports will be maintained. Compile together all documents regarding the report and file confidentially.

REFERENCED POLICIES

Incidents Response and Reporting
Emergency Response and Reporting
Review of Maltreatment of Vulnerable Adults
Reporting and Review of Maltreatment of Minors
Emergency Use of Manual Restraint and Positive Support Strategies
Death of Person Served

REFERENCED FORMS

Support Plan (SP)
Support Plan Addendums (SPA)
General Event Report (GER)
Accident Incident Report