

# Joyous Care Services

## **POLICY AND PROCEDURE ON DOCUMENTING AND REPORTING INCIDENTS, ACCIDENTS, AND EMERGENCIES**

### I. PURPOSE

The purpose of this policy is to provide instructions to employees for documenting and reporting incidents, accidents, and emergencies.

### II. POLICY

Employees will address all incidents, accidents, and emergencies according to the specific procedure and act immediately to ensure the safety of the individual(s) receiving services. After the situation has been resolved and/or the individual(s) involved are no longer in immediate danger, employees will complete the necessary documentation in order to comply with licensing requirements and to assist in developing preventative measures.

### III. PROCEDURE

#### A. Identification of incidents, accidents, and emergencies

1. Serious injury
  - a. Fractures
  - b. Dislocations
  - c. Evidence of internal injuries
  - d. Head injuries with loss of consciousness
  - e. Lacerations involving injuries to tendons or organs and those for which complications are present
  - f. Extensive second degree or third degree burns and other burns for which complications are present
  - g. Extensive second degree or third degree frostbite and others for which complications are present
  - h. Irreversible mobility or avulsion of teeth
  - i. Injuries to the eyeball
  - j. Ingestion of foreign substances and objects that are harmful
  - k. Near drowning
  - l. Heat exhaustion or sunstroke
  - m. All other injuries considered serious by a physician
2. Death of an individual receiving services
3. Any medical emergencies, unexpected serious illnesses, or accidents that require physician treatment or hospitalization
4. An individual's unauthorized absence
5. Any fires or other events that require the relocation of services for more than 24 hours or circumstances involving a law enforcement agency or fire department related to the health, safety, or supervision of an individual receiving services
6. Physical aggression by an individual receiving services against another individual receiving services that causes physical pain, injury, or persistent emotional distress, including but not limited to, hitting, slapping, kicking, scratching, pinching, biting, pushing, and spitting
7. Any sexual activity between individuals involving force or coercion
8. Suspected or alleged maltreatment of a minor or vulnerable adult
9. Medication errors causing injury or illness requiring physician treatment or patterns of medication errors
10. Instances of self-injurious behaviors (SIB) if it results in medical treatment or hospitalization
11. Suicide attempts

B. Employees will immediately notify the Administrator that an incident, accident, or emergency has occurred and follow any direction issued to them.

C. Employees will document incidents, accidents, and emergencies on an *Incident or Accident Report* and any related program or health documentation. They will not reference other individuals receiving services on any forms, with the exception of an *Alleged Maltreatment Report*.

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- D. If suspected or alleged maltreatment has occurred, the Administrator will complete an *Alleged Maltreatment Report*.
- E. The Administrator will provide any further instruction necessary to employees to ensure the safety and well-being of the individual(s) involved in the incident, accident, or emergency. If the incident involves suspected or alleged maltreatment, the Administrator will ensure that staff follow the applicable policies and procedures on reporting maltreatment.
- F. The Administrator will ensure that the legal representative, case manager, and other licensed caregivers (if applicable) of individual(s) involved were notified within 24 hours of the incident, accident, or emergency or within 24 hours of receipt of the information, unless the incident has been reported by another license holder. If the incident or accident involves more than one individual receiving services, the Administrator will ensure that personally identifiable information is not disclosed about any other individual receiving services when making the report to each individual's legal representative, case manager, and other licensed caregivers (if applicable) unless the license holder has the consent of an individual or individual's legal representative.
- G. The Administrator will ensure that a report is made of the following to the Office of the Ombudsman and the Department of Human Services Licensing Division within 24 hours of learning about the incident, accident, or emergency using the required reporting forms. These forms include *Death Reporting Form*, *Serious Injury Form*, and *Death or Serious Injury Report FAX Cover Sheet*. Further information on the definitions of serious injury may be found in the article entitled "What makes an injury serious enough to report?" located on the MN Office of the Ombudsman's website at <http://www.ombudmhm.state.mn.us>.
  - 1. Serious injury
    - a. Fractures
    - b. Dislocations
    - c. Evidence of internal injuries
    - d. Head injuries with loss of consciousness
    - e. Lacerations involving injuries to tendons or organs and those for which complications are present
    - f. Extensive second degree or third degree burns and other burns for which complications are present
    - g. Extensive second degree or third degree frostbite and others for which complications are present
    - h. Irreversible mobility or avulsion of teeth
    - i. Injuries to the eyeball
    - j. Ingestion of foreign substances and objects that are harmful
    - k. Near drowning
    - l. Heat exhaustion or sunstroke
    - m. All other injuries considered serious by a physician, including complications from previous injuries or treatments
  - 2. Suicide attempts
  - 3. Instances of self-injurious behaviors (SIB) if it results in medical treatment or hospitalization
  - 4. Death of an individual receiving services
- H. If applicable, the Administrator will ensure that a report is made to the Adult or Child Foster Care licensing authority for the following incidents within 24 hours of:
  - 1. The occurrence of a fire that causes damage to the residence or requires the services of a fire department or the onset of any changes or repairs to the residence that require a building permit.
  - 2. The occurrence of any injuries of an individual receiving services that require treatment by a physician.
  - 3. The occurrence of a death of an individual receiving services.
  - 4. Suspected maltreatment.
  - 5. Notification to an individual's physician because medication has not been taken as prescribed and the physician has determined that the refusal or failure to take the medication as prescribed created an immediate threat to the individual's health or safety or the health or safety of other individuals receiving services.

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- I. The Administrator will intervene and follow up on all incidents, accidents, and emergencies according to relevant policies and will ensure documentation is completed within 48 hours of all incidents.
- J. The Designated Coordinator will review and evaluate all *Incident or Accident Reports* at each program site regularly, monitor for patterns, and take corrective action as necessary to reduce the likelihood of similar future occurrences. This may include, but is not limited to, retraining of employees, changes in the physical plant of the program, and/or changes in the *Risk Management Plan*.
- K. Copies of *Incident or Accident Reports* will be mailed to the legal representative and case manager within 5 days. If requested, a copy will be mailed to the Adult or Child Foster Care licensing authority.
- L. In the event of the death of an individual, the Administrator will send the notification letter “Dear Newly Bereaved” from the Office of the Ombudsman to the next of kin.
- M. Within 24 hours of reporting maltreatment, the Administrator will ensure that the case manager and legal representative have been notified regarding the report of maltreatment including the following information (unless there is reason to believe that the case manager or legal representative is involved in the suspected maltreatment):
  - 1. Nature of the activity or occurrence reported.
  - 2. The agency that received the report.
  - 3. The telephone number of the Department of Human Services Licensing Division (651-431-6500).