Developmental Disabilities Administration (DDA) Policy on Reportable Incidents and Investigations (PORII)

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Deputy Secretary Welcome

Our number one priority for the people we support is their health and safety. The statewide PORII training has been developed based on current policy for you to utilize as an additional resource within your agencies.

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Agenda

- Background of the [Policy On Reportable Incidents and Investigations](#) (PORII)

- General Requirements

- Reporting Process and Expectations

- Types of Incidents

- Incident Reporting Reminder

- Statewide Contacts

- Questions

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What is PORII?

PORII is the Policy On Reportable Incidents and Investigations.

The policy outlines the following requirements:

- How to report
- When to report
- Type of incidents to report
- Responsibilities of reporters
- Requirements of submitted documentation

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Purpose

To ensure the health, safety, and welfare of individuals receiving services from DDA-licensed and DDA-funded providers.

PORII applies to any incident that threatens the health and safety and/or has the potential to cause harm to an individual.

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Who does PORII Apply too?
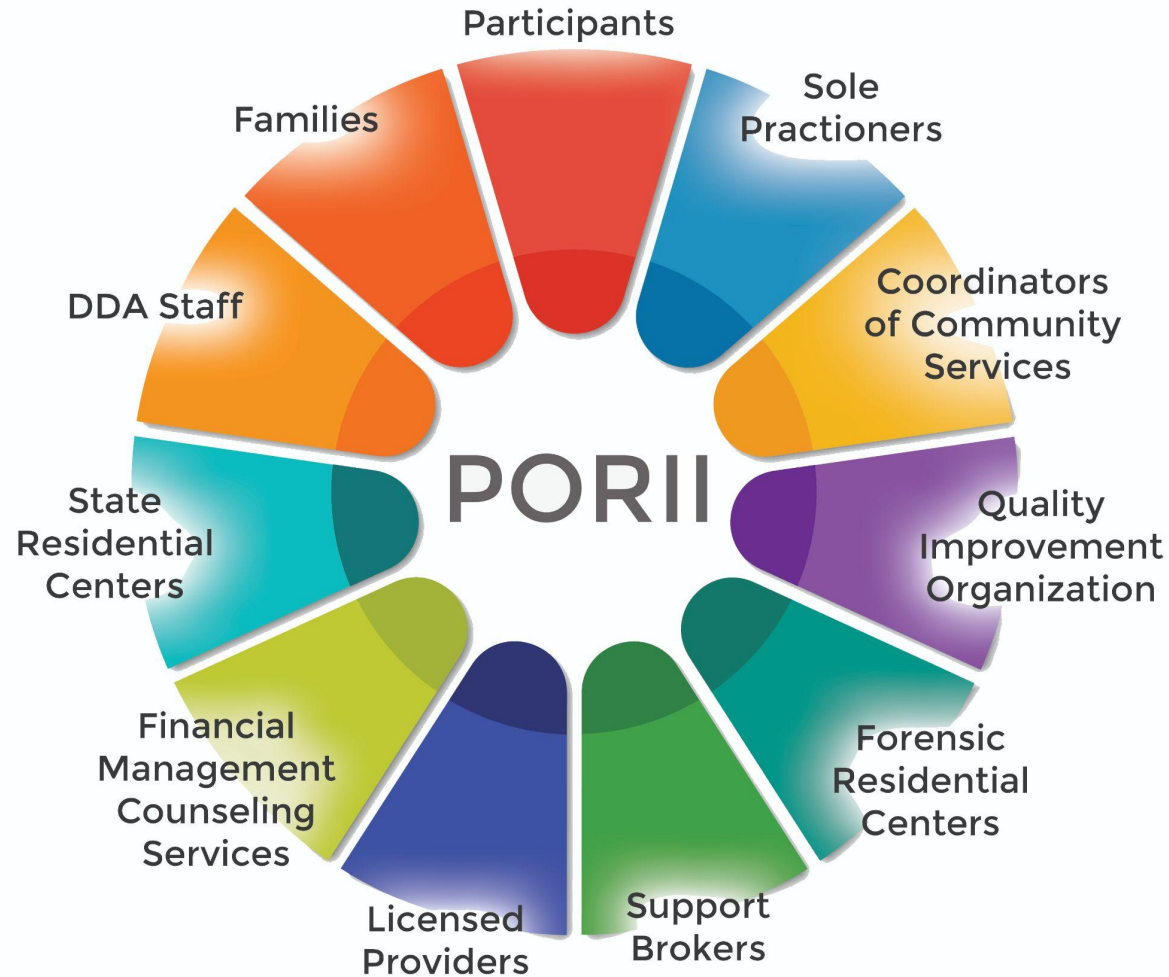
Incident Reporting

Incident Reporting – PORII outlines the most common incidents.

- Agencies must have internal protocols for determining "Other" incidents not specified in PORII.
- Agency Internal Protocol – to ensure compliance with PORII.

Agency Internal Protocol (1 of 2)

Operating Procedures must outline the following responsibilities and roles of all staff:

- How to identify an incident,
- How and when to report, investigate,
- Reviewing and addressing incidents,
- Monitoring the follow-up of incidents, and
- Identifying needed trainings to assist in the completion of duties
- Roles of the agency's Standing Committee

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Agency Internal Protocol (2 of 2)

Agency Protocol also includes:

The use of the following forms when investigating incidents that are reportable internally or externally:

- Agency Investigative Report (AIR),
- Standing Committee Review Form, and
- AIR Addendum

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Investigations

Designated Staff to Report and Investigate:

- Qualified reporters required to complete investigations training.

- Required to uphold the reporting and investigation duties noted within the PORII policy.

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Policy Distribution

A copy of PORII and agency's internal protocols shall be available to all (posted and electronic form), including:

- In-house emergency contact numbers of reporting entity.
- DDA Regional Office contact information.

All must be available electronically and posted at all DDA-licensed

sites.

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Requirements

- **Freedom from Retaliation**

  - Every reporting entity must have measures in place to reduce the potential for retaliation.

- **Comprehensive Approach**

  - Office of Health Care and Quality (OHCQ): reviews, prioritizes, and investigates all of Type 1 incidents.

  - DDA Regional Office: reviews, prioritizes, and investigates all of Type 2 incidents.

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Agency Responsibilities

- Ensure the health and safety of participant.
- Notify families and or advocates; CCS and external entities(CPS, APS, police, etc).
- Report to DDA via PCIS2 within one (1) working day of the incident or date of discovery.
- Investigate each incident per internal protocol.
  - Submit an AIR within ten (10) working days of discovery of the incident,
    - AIR submitted to Standing Committee for review.

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# **Support Broker and FMCS Responsibility**

- Ensure the health and safety of participant.
- Notify families and or advocates; CCS and external entities (CPS,APS, police, etc).
- Report to CCS within one (1) working day of the incident or date of discovery.

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Reportable vs Internally Investigated Incidents
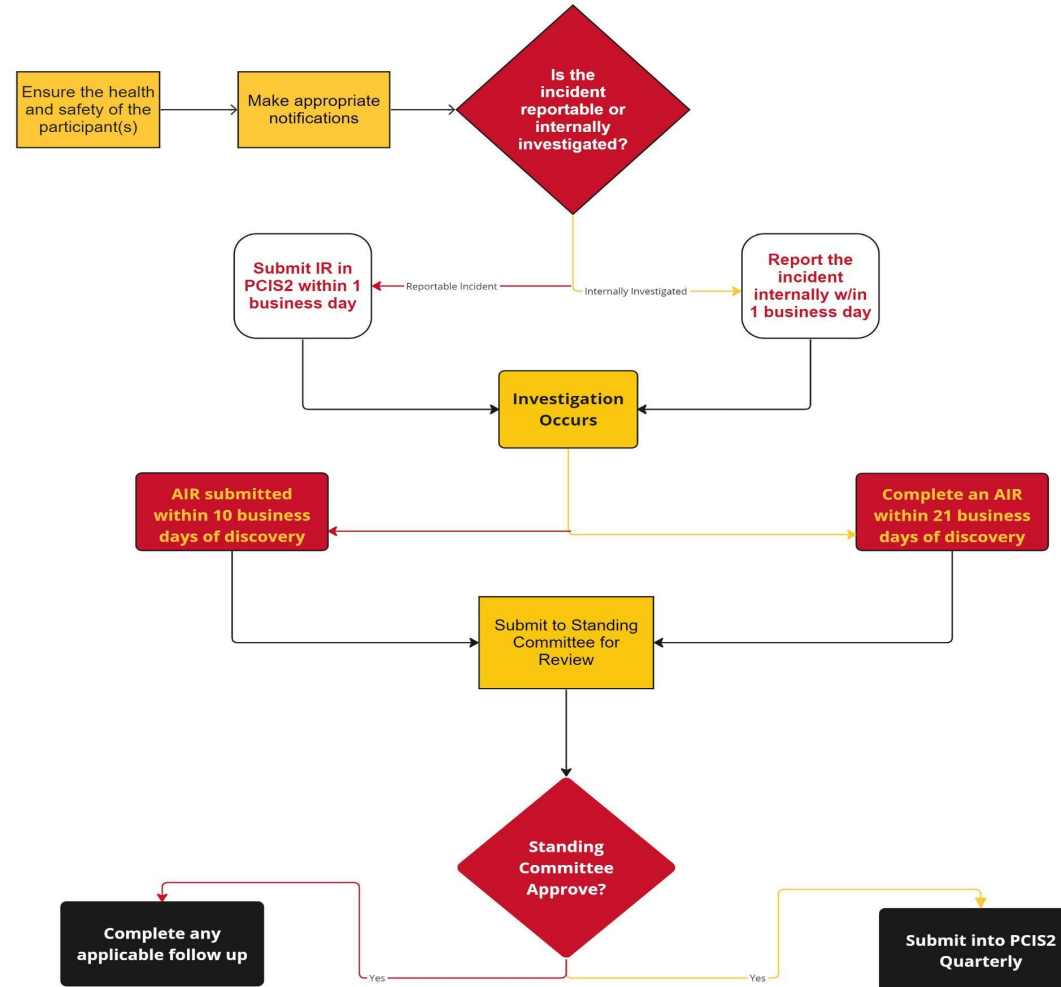
- [Flowchart Link](#)

Reportable vs Internally Investigated Incidents
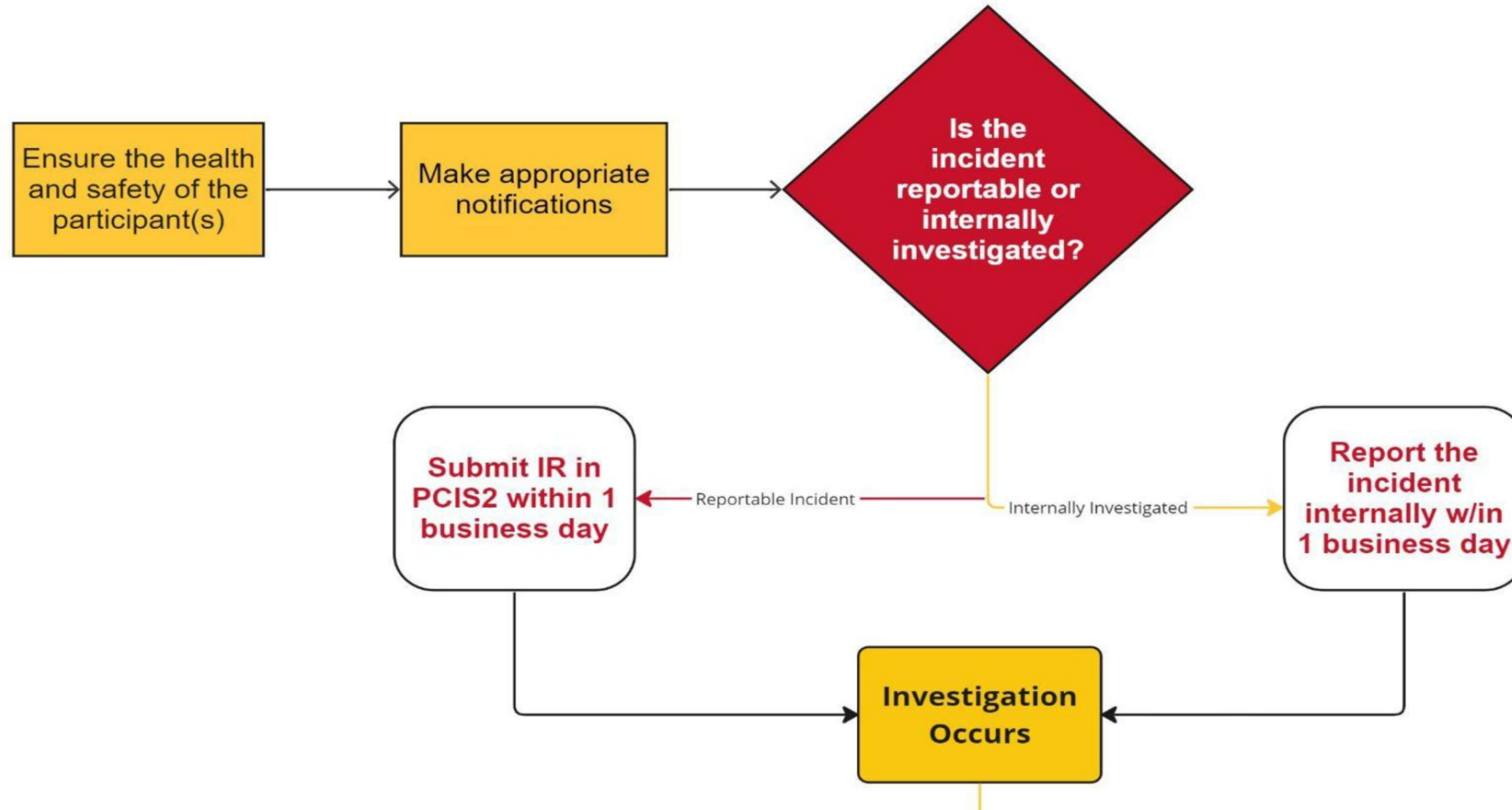
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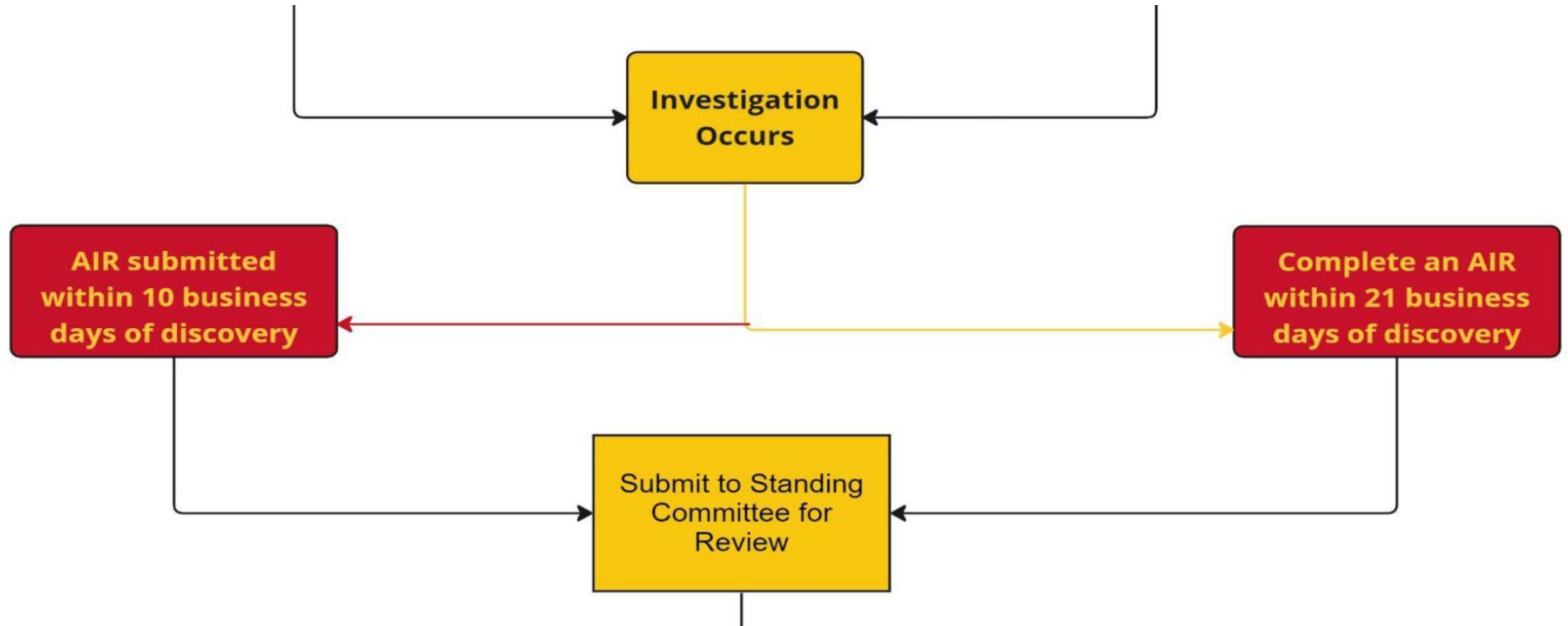
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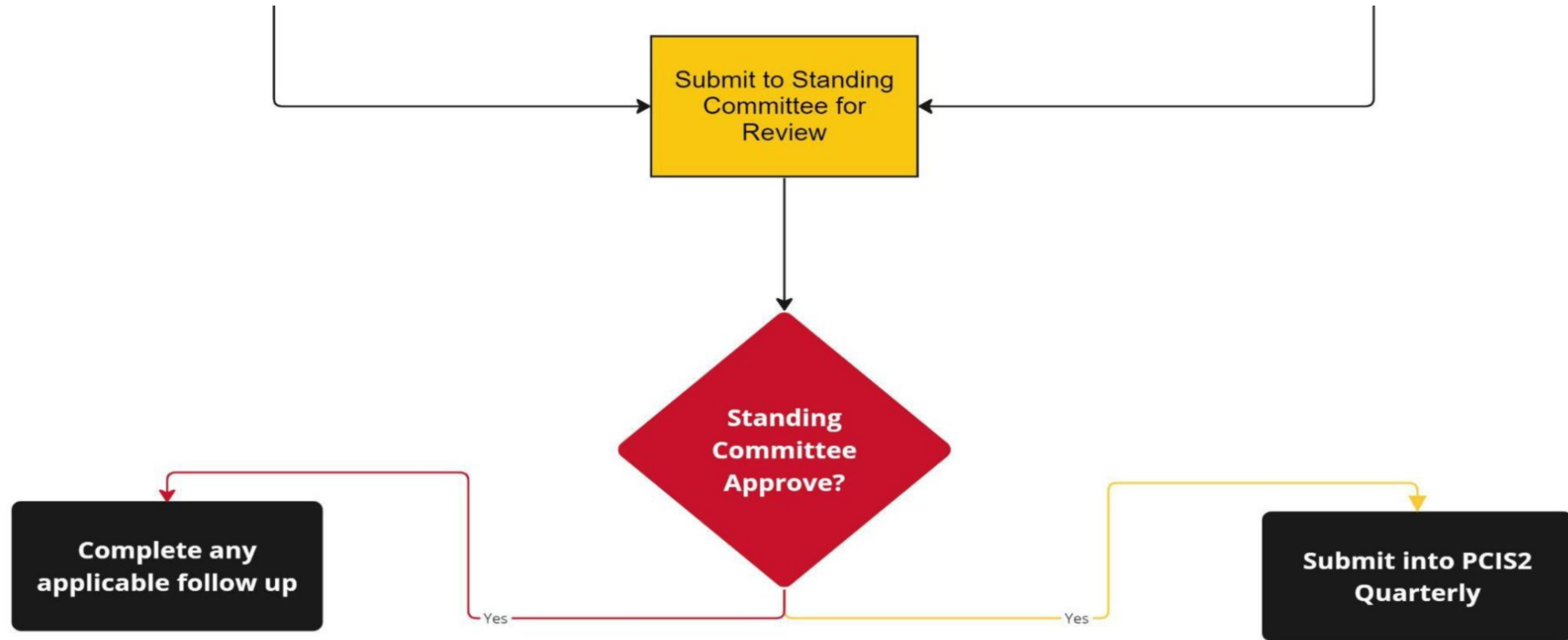
Internally Investigated Reporting Period

QUARTER	TIME PERIOD	REPORT DUE
1st	October- December	January 15th
2nd	January- March	April 15th
3rd	April-June	July 15th
4th	July- September	October 15th

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OHCQ Incident Prioritization

Referrals
Criminal issues
outside OHCQ jurisdiction; or immediate jeopardy

Adminstrative Review
Minimal risk of harm
OHCQ communicates with provide, submitted AIR

Medium
Opportunity for harm
Investigation initiated within 30 days by OHCQ

High
Serious threat to health and safety
Investigation initiated within 10 days by OHCQ

Immediate Jeopardy
Immediate & serious threat
Investigation initiated with 2 working days by OHCQ

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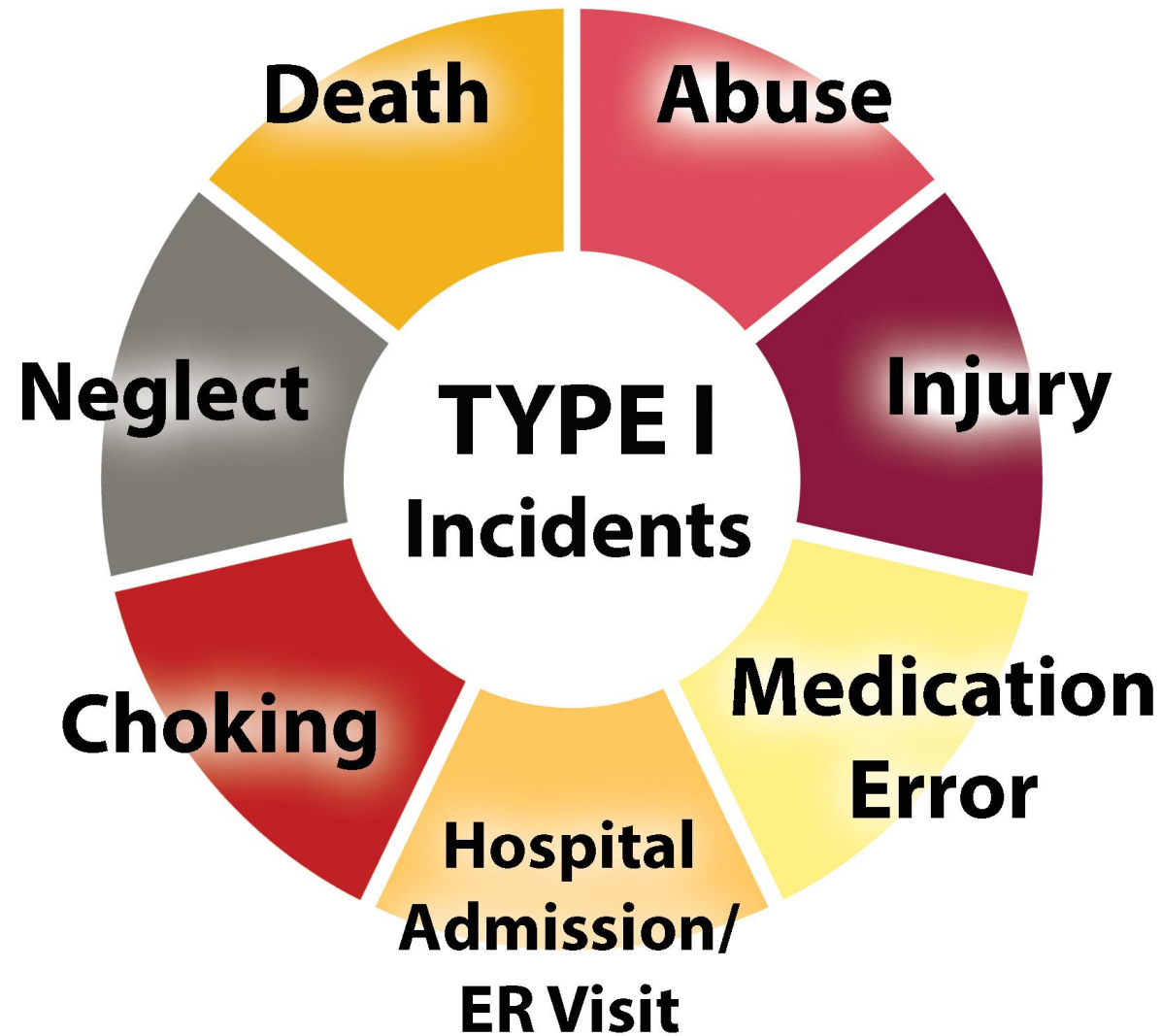
Polling Question

Within how many days is an Agency Investigative Report due after the incident date of discovery?

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Type I Incidents

Death · Abuse · Injury · Medication Error · Hospital Admission/ER Visit · Choking · Neglect · **TYPE I Incidents**

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Internally Investigated Incidents

Includes any events or situations that shall be reported to designated qualified staff within the agency.

- Must be reported to "designated agency staff" within one (1) day of discovery – agency then investigates incident.
- AIR must be completed within 21 working days using the DDA format submitted to standing committee.
- All internal incidents are reported to DDA quarterly.
- Three (3)internal investigated incidents of any kind within 4 weeks with the same participant is a reportable incident.

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Abuse (1 of 3)

The willful infliction of injury, unreasonable confinement, intimidation, or punishment with resulting physical harm, pain, or mental anguish.

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Abuse (2 of 3)

Reportable when?

Any suspected or confirmed incident of physical, sexual, psychological abuse, inhumane treatment, and or violation of rights

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Abuse (3 of 3)

Internally Investigated only when:

- An individual who repeatedly alleges unsubstantiated abuse which is documented in the PCP and addressed in an approved behavior plan.
- An incident that involves physical contact between 2 or more individuals that does not result in injury.

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Abuse Questions (1 of 2)

Here are a few questions to think about:

- Did you immediately ensure everyone's health and safety?

- Was the involved aggressor removed from individual contact?

- Was the incident investigated?

- Was the abuse physical or sexual? If yes, were the police notified? CPS/APS contacted?

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Abuse Questions (2 of 2)

- Are supports in place to assist the victim in coping with any physical or psychological trauma?
- Did the accused staff have all required training?
- Were all notifications made, including family, CCS, RO?

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Neglect

- Neglect is defined as the failure to provide proper care and attention to an individual that results in significant harm or jeopardy of harm to the individuals health, safety, or well-being.

- It is also the failure to provide necessities such as food, clothing, medical treatment, supervision, shelter, or safe environment.

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Neglect

Reportable when?

There is any suspected or confirmed incident of neglect, mistreatment of an at-risk adult.

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Hospital Admission/ER Visit (1 of 2)

Reportable when?

An unexpected and/or unplanned hospital admission or in-patient service for an individual whose PCP does not document the need for frequent/repeated hospitalizations because of a chronic somatic or psychiatric condition.

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Hospital Admission/ER Visit (2 of 2)

Internally Investigated when?

- A person's PCP documents the need for frequent hospitalizations.
- ER visit (e.g. not admitted, "observation,") occurs and the person is treated & released.

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Injury

- Injury is defined as any physical harm, hurt or damage to an individual caused by an act of that person or others.

- Injuries that result in medical emergencies that require immediate assessment and intervention are reportable incidents.

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Medication Error (1 of 2)

The failure to administer medications as prescribed or administering medication not prescribed by a licensed physician (incorrect dose, time, route, etc).

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Medication Error (2 of 2)

Reportable when?

- Has the potential to cause harm or results in requiring nursing, medical, or dental observation by a physician;

- results in the admission to a hospital or a 24 hour infirmary for treatment or observation.

Internally Investigated when?

An error with no adverse effects that does not require medical interventions.

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Choking & Death

- **Choking** is the obstruction of the flow of air from the environment into the lungs. Prevents breathing, partial or complete.
  - Reportable when?
    - The individual loses consciousness or receives CPR as a result of choking.
    - It occurs as a result of failure to train staff of specialized diet, failure to follow protocol for choking victim.
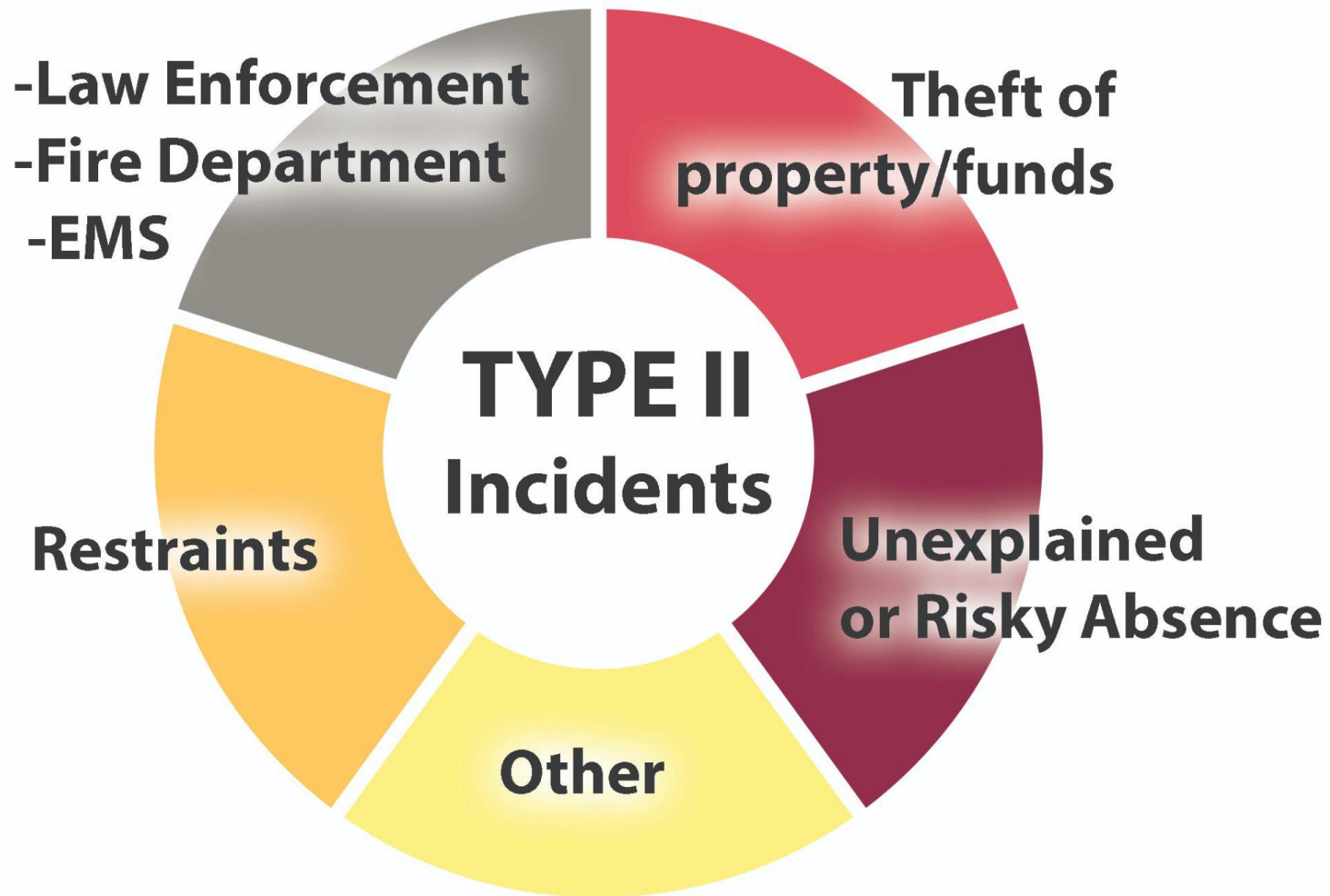- **Death:** All loss of life, regardless of cause is reportable.

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Polling Question

Do all injuries require either an internally investigated incident or a reportable incident?

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Polling Question

If an individual lives at home with family, and they reported to their CCS they were admitted to the hospital two (2) days ago, does an incident report need to be completed?

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Type II Incidents

- -Law Enforcement
- -Fire Department
- -EMS

Theft of property/funds

TYPE II Incidents

Unexplained or Risky Absence

Restraints

Other

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Law Enforcement (1 of 2)

Reportable when?

- Law enforcement responded due to an individual's behavior, and one or more of the following conditions was present:
    - No Behavior Support Plan (BSP) is in place.
    - The BSP was not implemented.
    - The individual is a safety risk to themself or others.
- May result in a police report being taken for the following reasons:
    - Forensic – arrested and taken to a police station.
    - Responding to a theft should be classified as "THEFT" incident report.

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Law Enforcement (2 of 2)

Internally investigated when?

- Law enforcement reported to a licensed site but it did NOT result in a police report.

- Police responded due to an individual's behavior, but one or more of the following conditions is present:
  - The behavior has been documented in the BSP.
  - The BSP was implemented.
  - The individual is NOT a safety risk to themself or others.

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Fire Department / EMS

ANY INCIDENT REQUIRING THE FIRE DEPARTMENT/EMS

REPORTABLE INCIDENT

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Theft

Any suspected or confirmed misappropriation of an individual's personal property or money.

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Unexpected or Risky Absence

- The unexpected or unauthorized absence of an individual whose PCP does not indicate the individual has unsupervised time must be reported.

 4 hours

- All parties must be notified if the individual is missing for more than four hours or is an immediate danger to that themselves or others.

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Restraints

Restraints include any physical, chemical, or mechanical intervention used to impede an individual's physical mobility or limit free access to the environment.

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Restraints (1 of 2)

Physical and Mechanical restraints need to be reported when:

- Restraining without having noted in a BSP
- Restraints are not part of the DDA approved curriculum
- Restricts the movement of an individual as a substitute for programming and or disciplinary purposes; or,
- Use of mechanical or physical restraint that results in an injury.

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Restraint (2 of 2)

A chemical restraint is reportable when:

- A medication intervention that is not considered a routine support to sedate, calm or manage acute behavior.
- Used as a preventative measure not a response to a behavior.

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Other Reportable Incidents

Other reportable incidents include any incident not otherwise defined in PORII that impacts or may impact the health or safety of an individual.

- A suicide threat or attempt;
- A communicable disease outbreak per CDC or the local health dept guidelines;
- Three (3) internally investigated incidents within 4-week period.

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Polling Question

If there was an incident that involves several individuals, does a report need to be completed for each person ?

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Incident Reporting Reminders (1 of 2)

- Notify Regional Office (RO) immediately;

- Incident Report (IR) is required to be submitted into PCIS2 within one(1) working day;

- Include in IR the immediate actions to ensure the health and safety of the individual and how it will be maintained during an investigation;

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Incident Reporting Reminders (2 of 2)

- Be as specific as possible in the narrative of the IR;

- Note the final diagnosis if pertinent to the IR – DO NOT use acronyms, provide a short description is helpful;

- If an IR needs to be redone or withdrawn, contact your RO;

- AIR are due within ten (10) business days.

- Please remember to respond to any of the DDA or OHCQ questions as quickly as possible.

- Reference PORII FAQ's when needed.

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Incident Triage Contacts

CMRO: cmrotriage.ddaqa@maryland.gov

ESRO: esrotriage.ddaqa@maryland.gov

SMRO : smrotriage.ddaqa@maryland.gov

WMRO: wmrotriage.ddaqa@maryland.gov

OHCQ: dd.triage@maryland.gov

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Regional Office Contacts

CMRO	ESRO
Phone: 410.234.8200 After hours: 410.978.4695	Phone: 410.572.5988 After hours: 410.572.5920
SMRO	WMRO
Phone: 301.362.5100 After hours: 410.905.4985	Phone: 301.791.4670 After hours: 443.932.8996

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Questions

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