



Developmental Disabilities Administration (DDA) Person and Family Training on the Policy on Reportable Incidents and Investigations (PORII)

Nicole Kropfelder, Statewide Director of Quality Enhancement

August 24, 2023



Agenda

- Background of the [Policy On Reportable Incidents and Investigations](#) (PORII)
- General Requirements
- Reporting Process and Expectations
- Types of Incidents
- Investigations
- Post Investigation
- Scenario
- Statewide Contacts
- Questions

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

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.

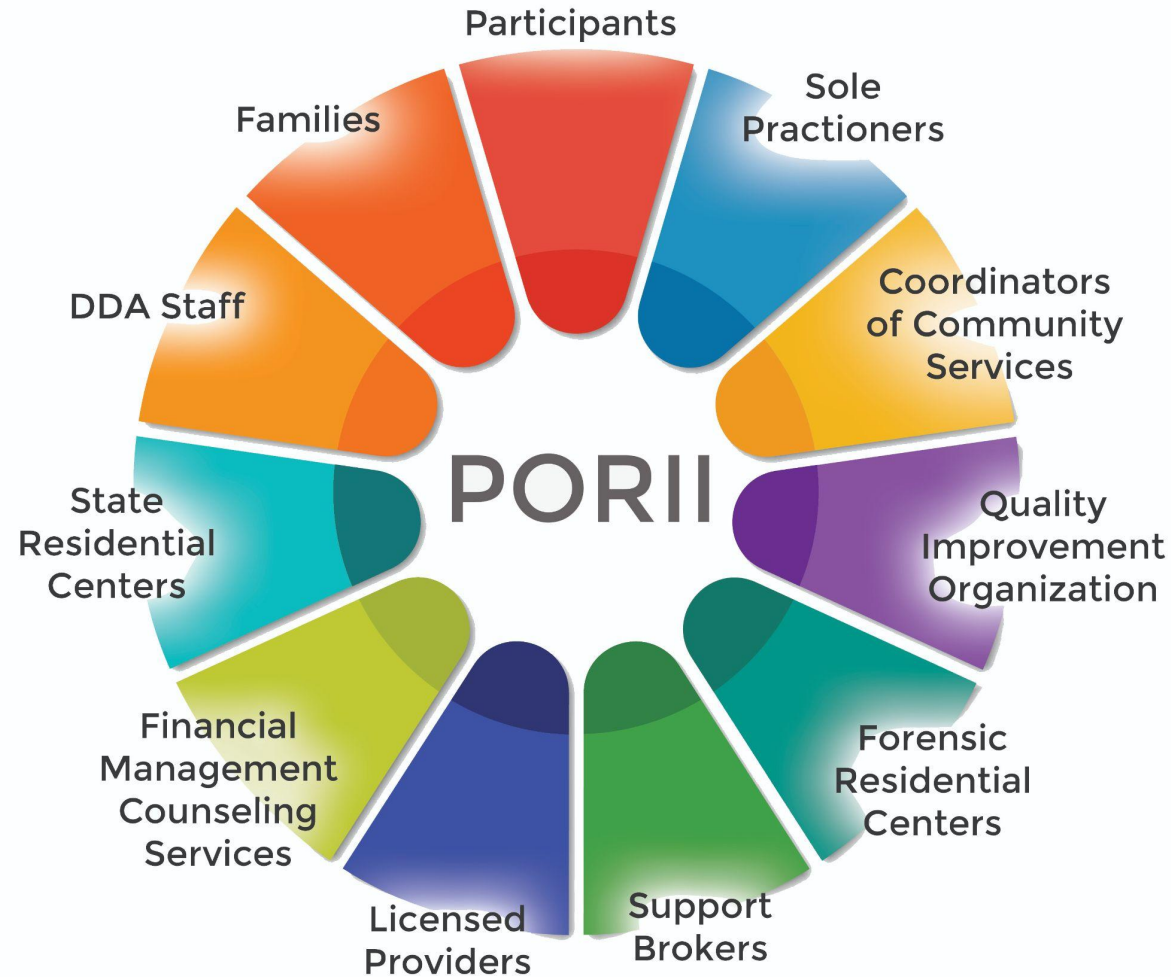
What Is an Incident?

Reportable incidents are significant events or situations that because of the severity or sensitivity of the situation must be reported.

Examples of reportable incidents:

- Abuse
- Neglect
- Medication Errors
- Choking
- ER Visits
- Restraints
- Other

Who Does PORII Apply to?



Incident Reporting



Incident Reporting – PORII outlines the most common incidents that should be reported.

- Agencies must have internal protocols for determining “other” incidents not specified in PORII.
- Agency Internal Protocol must be developed to ensure compliance with PORII.

Agency Internal Protocol

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

- How to identify an incident
- How and when to report, investigate
- How to review and address incidents
- How to monitor the follow-up of incidents
- How to identify needed trainings to assist in the completion of duties

Policy Communication

A copy of PORII and the agency's internal protocols must be available to all (posted and in 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.

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 Type 1 incidents.
 - DDA Regional Office: Reviews, prioritizes and investigates all Type 2 incidents.

How Are Incidents Reported to the DDA?

- PCIS2 is the software program to file an incident report.
- Automatic notifications are sent to the following entities:
 - Provider
 - CCS
 - OHCQ
 - DDA Regional Office

XII) Notifications

Does individual have family or guardian? Yes
Is family/guardian involved with individual? Yes
If family/guardian is involved, when were they notified? 01/13/2023
Please write notified family/guardian's name [REDACTED]
Has advocate, other than family been notified? No

XII: Law Enforcement

Was this incident reported to a law enforcement agency? Yes
If yes: officer's name [REDACTED] Jurisdiction [REDACTED] Report # [REDACTED]
Please write other law enforcement information, if available.



Reporter Responsibilities

- Ensure the health and safety of the participant.
- Notify families and/or advocates, the CCS and external entities (CPS, APS, police, etc).
- Report to the DDA via PCIS2 within one working day of the incident or date of discovery.
- Investigate each incident per internal rules.
 - Submit an Agency Investigative Report (AIR) within 10 working days of discovery of the incident.

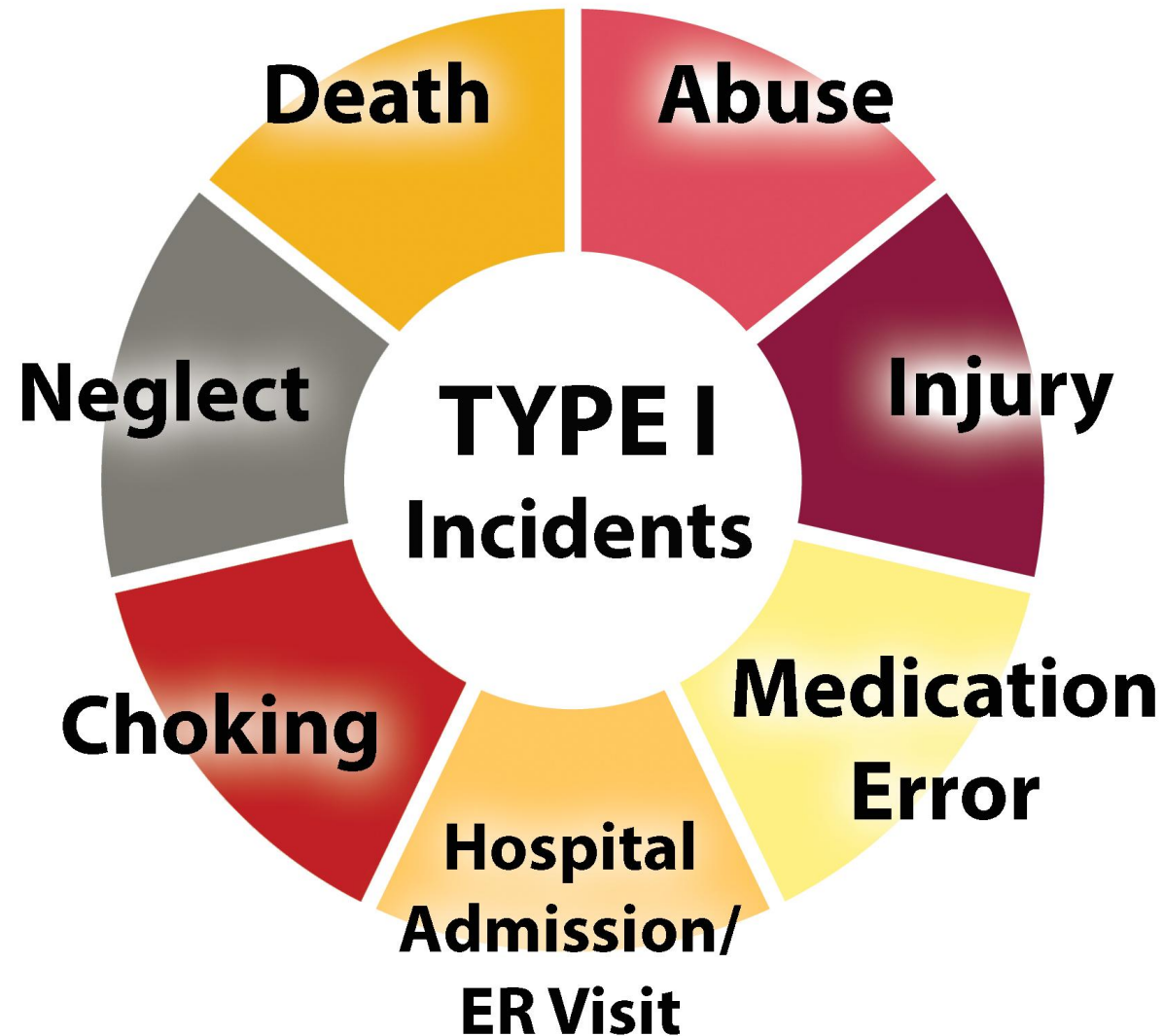
Support Broker and FMCS Responsibilities

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

OHCQ Incident Prioritization



Type I Incidents



Internally Investigated Incidents

- Includes any event or situation that is required to be reported to designated qualified staff within the reporting agency.
 - The agency is responsible for reviewing and investigating internal incidents.
 - An AIR must be completed within 21 working days.
 - All internal incidents are reported to the DDA on a quarterly basis.

Abuse (1 of 3)



- Abuse is defined as the willful infliction of injury, unreasonable confinement, threats or punishment with resulting physical harm, pain or mental distress.
 - It includes but is not limited to physical abuse, verbal/mental abuse, sexual abuse and the use of aversive techniques.
- Abuse can occur between staff and individuals and also between two or more individuals.

Abuse (2 of 3)

Reportable when?

- There is a suspected or confirmed incident of physical, sexual, psychological abuse, inhumane treatment and/or violation of rights.
- It involves staff and individuals and/or two or more individuals.

Abuse (3 of 3)

Internally investigated only when:

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

Abuse Questions

Here are some questions to think about:

1. Were the health and safety of you or your family member ensured immediately?
2. Was the involved aggressor removed from you or your family member?
3. Was the incident investigated?
4. Was the abuse physical or sexual? If yes, were the police notified? CPS/APS contacted?
5. Are supports in place to assist you or your family member with any physical or psychological trauma?

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 individual's health, safety or well-being.
- It is also the failure to provide necessities such as food, clothing, medical treatment, supervision, shelter or a safe environment.

Neglect

Reportable when?

There is any suspected or confirmed incident of neglect, mistreatment of an vulnerable person.

Hospital Admission/ER Visit (1 of 2)

Reportable when?

- There is 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.
- There is a moderate or severe injury (e.g., a fractured arm), in which case the incident should be reported as an “injury.”

Hospital Admission/ER Visit (2 of 2)

Internally investigated when?

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

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.

Medication Error (1 of 2)

Medication error is defined as the failure to administer medications as prescribed or administering medication that was not prescribed by a licensed physician (incorrect dose, time, route, etc).



Medication Error (2 of 2)

Reportable when?

The error has the potential to cause harm or results in requiring nursing, medical, or dental observation by a physician; or results in admission to a hospital or a 24-hour infirmary for treatment or observation.

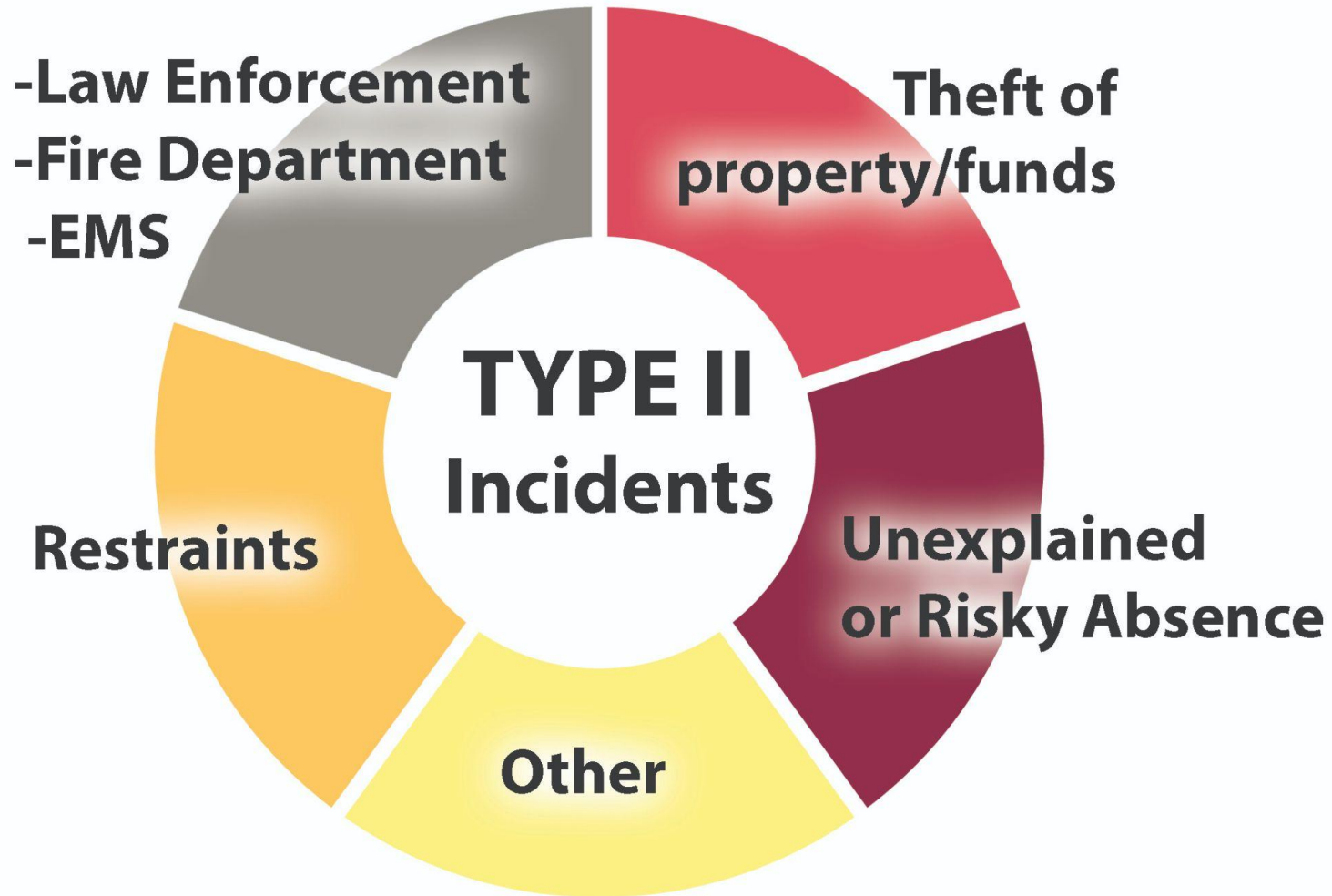
Internally investigated when?

It is an error with no adverse effects requiring medical interventions.

Choking and Death

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

Type II Incidents



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 themselves or others.
- May result in a police report being taken for the following reasons:
 - Forensic – The individual is arrested and taken to a police station.
 - Responding to a theft should be classified as “THEFT” incident report.



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 was present:
 - The behavior has been documented in the BSP.
 - The BSP was implemented.
 - The individual is NOT a safety risk to themselves or others.

Fire Department / EMS



ANY INCIDENT
REQUIRING THE
FIRE
DEPARTMENT/EMS

REPORTABLE
INCIDENT

Theft



Theft is defined as any suspected or confirmed misappropriation of an individual's personal property or money.

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 themselves or others.

Restraints

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

Restraints (1 of 2)

- **Physical and mechanical restraints must be reported when:**
 - The individual is restrained without having it noted in a BSP.
 - The restraints are not part of the DDA-approved curriculum.
 - The restraints restrict the movement of an individual as a substitute for programming and/or disciplinary purposes.
 - The use of mechanical or physical restraint results in an injury.

Restraint (2 of 2)

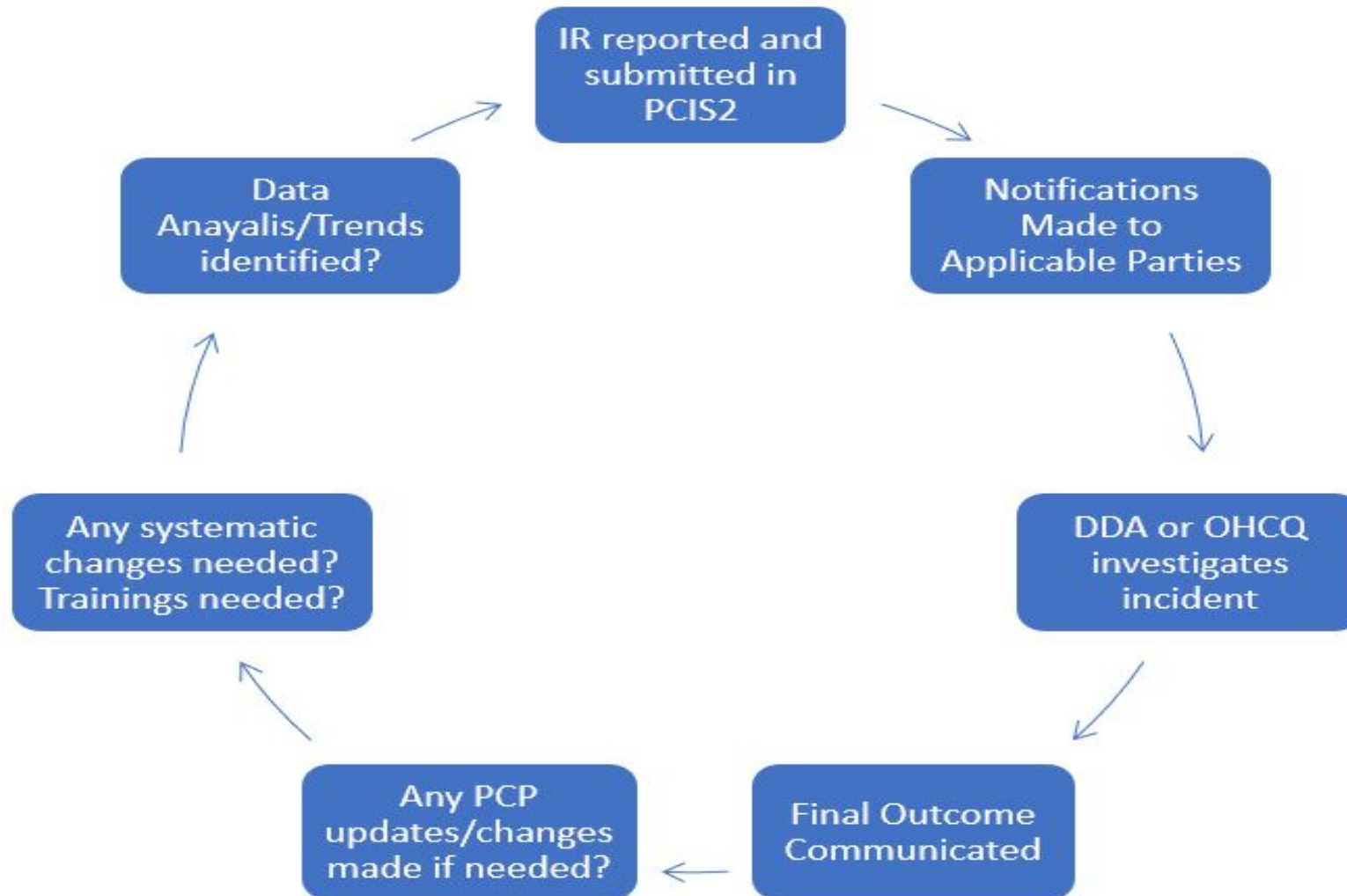
- A chemical restraint is reportable when:
 - A medication intervention that is not considered a routine support to sedate, calm or manage acute behavior.
 - Used as a preventative measure not a response to a behavior.

Other Reportable Incidents

Other reportable incidents include incidents not otherwise defined in PORII that impact or may impact the health or safety of an individual, including:

- A suicide threat or attempt.
- A communicable disease outbreak per the CDC or the local health department guidelines.
- Three internally investigated incidents within a four-week period.

Incident Reporting Process



Investigations

- Site visits
- Interviews with participant(s), staff and witness(es)
- Request for medical documents
- Issuance of a Standard of Deficiency or Notice of Compliance

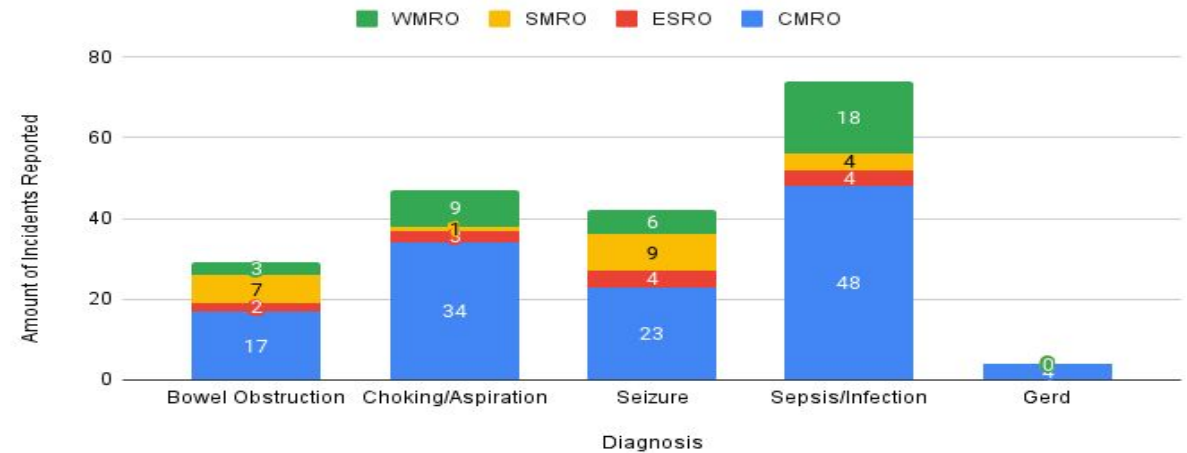
Monitoring and Implementation

- Monitoring to ensure compliance is being upheld

- Incident tracking

- Incident analysis

The Fatal Five



- Implementation of any trainings for identified areas of concern

Scenario

On October 20, 2021, Jane Doe reported to her morning staff, Clara, that her overnight staff was screaming at her and grabbed her arm to take a shower last night. There was a visible bruise on Jane's left arm. Clara reported the incident to her supervisor immediately.

What happens next?

How to Report?

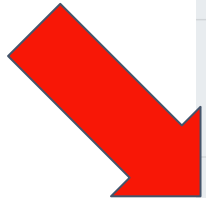
- [The DDA website](#)
- [Maryland Department of Health Flyer](#)

QUICK LINKS

Licensee
Directories

File a Complaint

Long Term Care
COVID-19
Dashboard



Office of Health Care Quality

7120 Samuel Morse Drive, Second Floor, Columbia, MD 21046-3422



Incident Triage Contacts

CMRO – cmrotriage.ddaqa@maryland.gov

ESRO – emrotriage.ddaqa@maryland.gov

SMRO – smrotriage.ddaqa@maryland.gov

WMRO – wmrotriage.ddaqa@maryland.gov

OHCQ – dd.triage@maryland.gov

Quality Enhancement (QE) Contacts

CMRO

Phone: 410.234.8200
After hours: 410.978.4695

ESRO

Phone: 410.572.5988
After hours: 410.572.5920

SMRO

Phone: 301.362.5100
After hours: 410.905.4985

WMRO

Phone: 301.791.4670
After hours: 667.301.8756

Questions

