

INCIDENT REPORTS

Policy Number

1033.001

Policy Category

Administrative

Target Audience

All Care Resource Employees

Overview

Care Resource has standard procedures related to receiving, responding, and resolving incidents.

Purpose

The purpose of this policy is to outline the processes and protocols related to all incidents.

Policy

Any incidents or allegations involving staff and/or clients/patients must be promptly reported to health center management and/or Human Resources (HR) as established in the following procedure.

General Incident Reports

In any work-related incident, any employee can file an incident report by completing an Incident Report Form. This form is to be completed no later than 48 business hours of the incident occurrence and/or discovery of an incident occurrence. This report must be presented to the immediate Supervisor, Manager, or Director who should conduct an initial investigation. S/he will be responsible for reviewing, evaluating, and recommending further actions.

If the incident involves more than one department, the department's Supervisor, Manager and/or Director where the incident report was originally filed, will be forwarded to the applicable Manager(s) and/or Director(s) for further review and

recommendations. Management involved should take the necessary steps to bring the incident to a satisfactory resolution. HR will review the incident report the recommended actions and determine if additional action(s) are needed or if the issue has been thoroughly resolved.

After HR's analysis, it is determined that the issue has been resolved at the departmental level. HR will consider the case closed, document the incident in the appropriate log, and retain records according to Records Retention policy (policy no. 3016.001).

If it is determined that additional actions are needed, HR will do its due diligence to bring the issue to closure. Follow up actions by HR can include but are not limited to opening a formal investigation, coordinating, or arranging training or development of improvement plans, issuing disciplinary processes, adjusting policies or procedures. All incident reports must be appropriately signed and dated by the employee and reviewer(s).

Emergency Codes

When an emergency code is called, as defined in policy no. 1025.004 "Emergency Management Plan (EPM)," an Incident Report Form must be completed. A General Incident Report Form is used to report codes Gray and Pink; these incidents are handled in accordance with the General Incident Report section of this policy. Codes M, Orange, Blue, Vacate, and Lockdown are reported utilizing the Medical Safety and Risk Management Incident Form and are handled in accordance with the Medical Safety and Risk Management Reporting section of this policy. Code Fire is reported in accordance with section Hazardous Spills; Property Damage; Fire Safety Equipment Reporting of this policy.

Harassment

If the issue relates to Harassment as defined by policy no. 5003.001, and it involves the Supervisor, Manager, or Director. The affected individual(s) must present their incident report directly to HR for further investigation.

Department of Children and Families (DCF) Incident Reporting

Suppose the incident qualifies as a critical incident according to the definitions contained in Department of Children and Families (DCF) CFOP 215-6 or CFOP 180-4, and not before ensuring that assistance has been provided to the individual(s) involved and the situation is stabilized. In that case, such incident must be reported to the Incident Coordinator using the incident report form. The Incident Coordinator or designee shall immediately report any knowledge or reasonable suspicion of abuse, neglect, or exploitation of a child, aged person, or disabled adult to the Florida Abuse Hotline on the state-wide toll-free telephone number (1-800-96ABUSE)

The Incident Coordinator shall submit incident reports into the Incident Reporting and Analysis System (IRAS) on all reportable incidents per CFOP 215-6, within 24 hours

of receiving notification of a reportable incident.

If an incident has an immediate impact on the health or safety of a consumer, has potential media impact, or involves employee-related incidents of criminal activity, the Incident Coordinator must notify the Managing Entity (ME) Risk and Compliance Coordinator immediately upon discovery.

Reportable incidents that may involve an immediate or impending impact on the health or safety of a client shall be immediately reported to the contract manager; and other reportable incidents shall be reported to the ME and Department's Office of Inspector General by completing a Notification/Investigation Request (form CF 1934) and emailing the request to the Office of Inspector General at IG.Complaints@myflfamilies.com. The Incident Coordinator may also mail the completed form to the Office of Inspector General, 1317 Winewood Boulevard, Building 5, 2nd Floor, and Tallahassee, Florida, 32399-0700; or via fax at (850) 488-1428.

Certain incidents may warrant additional follow-up by the ME. Follow-up may include on-site investigations or requests for additional information or documentation. When additional information or documentation is requested, the Incident Coordinator will submit the information requested by the ME within 24 hours unless otherwise specified in the request.

It is the responsibility of the Incident Coordinator to maintain a monthly log listing all incidents occurring at the health center, including those submitted to the Office of the Inspector General and those not reportable in IRAS, with the following information: Consumer's initials, incident report tracking number from IRAS (if applicable), incident report category, date and time of the incident, and follow-up action taken. The Incident Coordinator will report seclusion and restraint events in SAMHIS and in accordance with Rule 65E-5.180(7) (g), F.A.C.

The Incident Coordinator will ensure timely notification of critical incidents, and the provision of details of the incidents will be made to appropriate individuals or agencies such as emergency medical services (911), law enforcement, the Florida Abuse Hotline, Agency for Health Care Administration (AHCA), or Center for Mental Health Services (for licensed mental health facilities), as required. The IRAS reporting process does not replace reporting incidents to other entities as required by statute, rules, or operating procedure.

Incidents that must be reported include injury, serious illness, and exposure to hazardous materials/situations, certain specific situations involving clients/patients, wrongdoing by employees and/or any other 3rd parties, employee arrests or misconduct, accidents, child arrests, complaints, adult or child death, sexual

abuse/sexual battery, missing child, threats, and/or any other situation that may be deemed out of the ordinary or serious.

Reportable allegations cover wrongdoing, fraud, theft, inappropriate employee acts leading to injury or abuse, breach of confidentiality, improper or commitment of public funds.

Medical Safety and Risk Management Reporting

If the issue relates to Medical Safety as defined by policy No. 10000.001, Risk Management and Safety program staff must use the Medical Safety/Risk Management Incident Report form to report a medical safety or risk issue. Medical Safety/Risk incidents must be submitted to the Quality Assurance (QA) /Quality Improvement (QI) department. After QA/QI's investigation, it is determined that additional action is needed by HR; QA/QI will refer to HR. Medical Safety/Risk incidents must be reported within 24 hours of the incident. QA/QI must generate an annual assessment/summary report to include a breakdown of the number and type of medical safety/risk incidents, recommendations, and action taken.

Hazardous Spills; Property Damage; Fire Safety Equipment Reporting

Incidents relating to property damage or loss; security involving clients/patients, staff and/or the public (others accessing the Health Center); hazardous materials and waste spills and exposure; and fire safety equipment and utility management problems, failures, and use errors should be reported immediately to the Building Operations and Maintenance department. These incidents must be documented using the Health Center's building operations and maintenance electronic ticketing system. Building Operations and Maintenance department will be responsible for submitting a report of these incidents and their outcome to the QA/QI department. QA/QI must generate an annual assessment/summary report to include a breakdown of the number and type of building operations and maintenance incidents, recommendations, and actions.

Workplace Injury or Illness Incident Reporting

If the incident is related to an employee injury or workplace illness, the employee or his/her supervisor must fill out an Injury and Illness Incident Report- OSHA form and submit it to HR. See policy No. 5004.001 Safety regulations for more details.

If further investigations are required, HR will notify affected parties of the results, close incident reports, and maintain records according to recordkeeping policy.

Logging, tracking, and annual assessment

Once the incident has been resolved, Incident Reports will be logged, tracked, and annually assessed by HR and/or QA/QI department, depending on the nature of the incident. Responsibilities are as follows:

- HR will be responsible for general incident reports
- QA/QI department will be responsible if the incident relates to safety, risk management, or privacy issues
- Either department shall document and maintain complete records of the incident.
- Ensure that all incidents are reviewed, logged, evaluated, investigated and that the necessary corrective action plans are developed and implemented.
- Provide access to Incident Reports upon request for audit purposes.
- Generate an annual assessment/summary report to include a breakdown of the number and type of incidents, recommendations, and action taken.

Enforcement

This policy will be enforced by Management.

Approved by:

- Print and Sign Name Rick Siclari, MBA - CEO



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