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|  | Date Issued 11/1/04 | Date of Last Review/Revision 8/20/2024 | Page 1 of 3 | Item No. CDSM_QA_01 |
| | Applicability: <input type="checkbox"/> CDSL T <input checked="" type="checkbox"/> CDSM <i>Check all that Apply</i> | | | |
| | <input checked="" type="checkbox"/> All | <input type="checkbox"/> Day Hab | <input type="checkbox"/> HR/Training | <input type="checkbox"/> Self-Directed |
| | <input type="checkbox"/> Admin | <input type="checkbox"/> Facilities | <input type="checkbox"/> IRA | <input type="checkbox"/> SEMP |
| | <input type="checkbox"/> Bus Ofc/Finance | <input type="checkbox"/> Fam Care | <input type="checkbox"/> IT | <input type="checkbox"/> Transportation |
| | <input type="checkbox"/> Clinical | <input type="checkbox"/> Fam Spt Serv | <input type="checkbox"/> Nucor | <input type="checkbox"/> Unistel |
| | <input type="checkbox"/> Comm Hab | <input type="checkbox"/> Foundation | <input type="checkbox"/> Pre Voc | <input type="checkbox"/> Warrior Salute |
| | <input type="checkbox"/> Compliance/QA | <input type="checkbox"/> Housing | <input type="checkbox"/> PR/Marketing | |
| Topic: Incident Management | | | | |
| Attachments/Related Forms: QA 01 Form 01 Incident Definitions/Glossary QA 01 Form 02 Policy Training House Meeting QA 01 Form 03 Immediate Response Manager Report QA 01 Procedure 01 Reporting Incidents & Immediate Response QA 01 Procedure 02 Investigation & Incident Management Processes QA 01 Procedure 03 Notification of Incident Policy & Rights | | | | |
| Policy Review Frequency | Policy and Procedure Department Authority: | | | |
| Every three years/ as needed | James Velazquez, Director of Compliance and Quality Improvement | | | |
| Training Method | Author/Reviewed/Revised by: | | | |
| Face to Face | Erin Bostian, Quality Improvement Incident Manager | | | |
| Training Frequency | | | | |
| Initially and annually | | | | |

REGULATORY AND POLICY REFERENCES:

- 14 NYCRR 624, 625
- Protection of People with Special Needs Act – Justice Center
- NYS Social Services Law Chapter 193
- Article Six, Title 6 of Social Services Law-Child Protective Services.
- Rec Adm 01 Jonathans Law Release of Records

PURPOSE

The purpose of reporting, investigating, reviewing, correcting and monitoring Reportable Incidents is to protect individuals receiving services from harm, to enhance the quality of their services and care, to ensure that they are free from abuse and neglect, and to ensure measures are put in place to prevent a reoccurrence of the same or similar event or situation.

BACKGROUND

The intent of this policy is to protect individuals and provide guidelines on management of reports of Abuse/Neglect, Significant Incidents and Notable Occurrences as required by the Protection of Persons with Special Needs Act (law), 14 NYCRR Part 624, and 625 for those individuals who are receiving services in a facility operated or certified by the Office for People with Developmental Disabilities (OPWDD).

POLICY

All staff of CDS Monarch as custodians, will report all individual situations which meet the definitions of Reportable Abuse/Neglect, Significant Incidents, and Notable Occurrences (see glossary for terms and definitions).

All staff, as mandated reporters, who have reasonable cause to suspect a reportable incident involving an individual receiving services, must report to the Vulnerable Persons Central Register (VCPR/Justice Center) immediately upon discovery. Discovery occurs when the mandated reporter either directly observes the reportable incident, or when

he or she receives notice from another person that provides the mandated reporter with reasonable cause to suspect that an individual was subjected to a reportable incident. Each discovering staff is required to report to the Vulnerable Person's Central Register, even if the reporter knows, or believes, that another custodian has made the same, or similar report to the VPCR.

CDS Monarch will promptly report, investigate, review and implement actions that are necessary to ensure individual protection and will make every effort to take measures necessary to prevent re-occurrence to the same or similar risk. The investigation of all Reportable Incidents and Notable Occurrences will begin immediately upon discovery.

CDS Monarch must consider the seriousness of an allegation when implementing immediate protective actions. (Refer to QA 16 Policy Implementing Protective Actions). When appropriate, an employee, intern, volunteer, consultant, or contractor alleged to have abused or neglected a person must be removed from direct contact with, or responsibility for, all persons receiving services from the agency (Refer to HR Policy Administrative Leave).

CDS Monarch prohibits mistreatment, abuse or neglect of any individual. Corporal punishment, degradation, humiliation, or dehumanization of any kind against an individual is prohibited. Any alleged or known acts of individual abuse will be reported immediately and a full investigation completed. Conduct by a custodian that impedes the discovery, reporting, or investigation of the treatment of an individual receiving services by falsifying records, or actively persuading a custodian or other reporter from making a report of a reportable incident, may face disciplinary action up to and including termination at any time.

CDS Monarch employees are required to participate, and will cooperate and assist in investigations as applicable.

Law Enforcement Officials **must** be notified of any Abuse/Neglect, Significant Incidents, and Notable Occurrences where a potential crime has occurred, or any Incident that requires the involvement of law enforcement for the protection and safety of the individual receiving services.

Individuals receiving services and their families will be provided information on the agency's incident reporting policy, and their rights related to incidents, upon admission and annually thereafter. (Refer to QA 01 Procedure 03, Notification of Incident Policy & Rights).

An individual's family, guardian, or personal representative is to be notified of Abuse/Neglect, Significant Incidents and Notable Occurrences within twenty-four (24) hours of occurrence/discovery either by personal phone contact or by certified letter. For Willowbrook Class Members, notifications to the Consumer Advisory Board is required. Unless they are the target of the incident allegation.

Assaults by employees on individuals will be reported as allegations of physical abuse and local law enforcement authorities will be notified immediately. All Missing Person(s) or Unauthorized Absence(s) must be reported as significant incidents and the family and/or guardian notified. All efforts will be made to locate missing individuals.

All deaths of individuals which occur in a CDS Monarch facility including Family Care will be reported to OPWDD and the NYS Justice Center. Sudden unexpected deaths shall be reported to the Medical Examiner/Coroner. Deaths not due to natural causes will be reported to Law Enforcement. For Willowbrook Class Members, a notification to the New York Lawyer(s) for the Public Interest is required. The OPWDD Report of Death must be completed in the Incident Reporting Management Application (IRMA) within 5 working days of the discovery of death.

Any suspected child abuse or maltreatment of an individual under the age of 18 must be reported to the Statewide Central Register for Child Abuse and Maltreatment (Child Protective Services). Mandated reporters must make the required reports of the child abuse or maltreatment to the Central Register directly and immediately notify their supervisor. (NYS Social Services Law Chapter 193)

All Abuse/Neglect, Significant Incidents, and Serious Notable Occurrences must be immediately reported by telephone to the Incident Compliance Officer of the Incident Management Unit (IMU) of OPWDD during regular business hours. To notify IMU of incidents afterhours, a call to the Incident Management Hotline (1-888-479-6763) is required. All incidents are entered into the Incident Reporting Management Application (IRMA) statewide database for incident reporting within 24 hours of occurrence or discovery, or the close of the next business day, whichever is later.

If an agency investigator recognizes a potential conflict of interest based on information discovered during the course of an investigation, the investigator will report the potential conflict of interest to his/her supervisor, and the agency will reassign the investigation when a conflict of interest exists.

CDS Monarch Incident Review Committee (IRC) will meet, review, make recommendations, and monitor Reportable Incidents in accordance with Part 624 NYCRR.

As required, the agency has an established dedicated mailbox in order to act on issues, including requests from OPWDD and the NYS Justice Center in a timely manner (OPWDD.Incident@CDSMonarch.org).

PROCEDURE:

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| <p><u>Quality Improvement Incident Manager</u></p> | <ol style="list-style-type: none"> 1. Provides oversight for overall implementation and management of incident management processes including, providing technical support within the organization and serves as the liaison with OPWDD’s Incident Management Unit and Justice Center. 2. Monitors all records related to the incident management process to ensure requirements are met per OPWDD regulations. 3. Completes an Annual Incident Trend Report for submission to CDS Monarch Leadership, Incident Review Committee, and OPWDD. |
| <p><u>Incident Management Coordinator</u></p> | <ol style="list-style-type: none"> 1. Monitors and maintains electronic records in IRMA, completes IRC Minutes, submits Corrective Action Plans, submits Abuse/Neglect Investigations via WSIR. 2. Serves as a liaison with OPWDD’s Incident Management Unit and Justice Center. 3. Completes weekly reports as specified by the DQI to track the Agency’s Incident Management operations. |
| <p><u>Quality Improvement Investigator</u></p> | <ol style="list-style-type: none"> 1. Completes quality incident investigations of Reportable Incidents, maintaining applicable compliance standards. 2. Makes appropriate recommendations to safeguard individuals, ensuring the highest quality care to individuals receiving services. |