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- 9) If the individual was hospitalized, the Final Report must include an indication that the Hospital Discharge Summary was provided, a summary of its contents and a description of any plans for subsequent medical follow-up
- 10) If the individual is deceased, the Final Report is to be supplemented by a hard copy of the following:
 - (a) Lifetime medical history
 - (b) Copy of the Death Certificate
 - (c) Autopsy Report, if one has been completed
 - (d) Discharge Summary from the final hospitalization if the individual died while hospitalized
 - (e) Results from the most recent physical examination
 - (f) Most recent health and medical assessments
 - (g) Name and address of the family member notified of the results of the investigation
 - (h) Date on which the incident was considered “finalized” by Greene Arc, Inc. and the name and title of the Representative who made the determination

After final submission by the Provider, the County or ODP will perform a management review and close the incident. Documents which are not immediately available must be forwarded to the appropriate properties as they become available. If after attempting to acquire the document it is determined to be unobtainable, the expecting party will be notified.

An incident is “finalized” when the report is complete, investigation is complete and all required follow-up has been identified. This should normally happen within thirty (30) days of the incident or first knowledge of the incident by the Provider, unless an extension has been generated.

INVESTIGATION PROCESS

Any reportable incident may be investigated by Greene Arc, Inc., the County and/or ODP. Certain designated incidents are to be investigated, either jointly or independently, by the Provider, the County and/or ODP. All of these designated investigations are to be conducted by

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Certified Investigators. The involvement of the County and/or ODP shall not hinder the prompt investigation by the Provider.

Incidents that are categorized as critical incidents must be investigated by a Certified Investigator who has taken and passed the Department's CI course (55 Pa. Code §§ 2380.17, 2390.18, 6100.402, 6400.18, 6500.20). The Point Person for an incident must review the information given by the Initial Reporter, determine the appropriate primary and secondary incident category and determine if an investigation by a CI is required or if not required, desired. If an investigation is required or desired for an incident, each Entity investigating must follow the Department's standardized investigation process as outlined in the most current ODP CI manual.

If an investigation is required (or desired) to be completed by a County ID Program/AE, the County ID Program/AE must fully comply with all applicable procedures related to the investigation of incidents. County ID Program/AE investigators are not permitted to review the investigation of another Entity and make an investigation determination based solely on that evidence without conducting their own investigation. In addition, when a County ID Program/AE has a different investigation determination than a Provider or SCO, the County ID Program/AE must work with the other investigating Entity to reconcile the difference.

A County ID Program/AE is required to complete any investigation requested by ODP.

At no time should the investigating Entity covered by the scope of this bulletin (referred to as the ODP investigating Entity) delay, halt or terminate an investigation because of the involvement of an external investigating Entity. If an external investigating Entity requests that an ODP investigating Entity delay, halt or terminate an investigation, the ODP investigating Entity must attempt to obtain this request in writing and discuss the request with the appropriate regional ODP office.

Concurrent investigations by law enforcement and Protective Service Agencies may occur at the discretion of those Entities. When there are multiple Entities conducting investigations, every effort should be made to coordinate the investigations to avoid continued stress or trauma upon all individuals involved.

The chart below identifies which primary and secondary incident categories require an investigation by a CI. At times, more than one ODP investigating Entity will be investigating the same incident.

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Incidents to Be Investigated by a Certified Investigator¹

There are circumstances when SCOs will manage incidents in lieu of a Provider; therefore, the term “Provider” may be replaced with SCO in the chart in certain circumstances (see section, “Responsibility for Reporting and Investigating,” for further guidance).

Primary Category	Secondary Category	Entity Responsible for Ensuring CI Investigation is Complete
Abuse	All	Provider
	Misapplication/ Unauthorized Use of Restraint (injury)	Provider and County ID Program/AE
Death	Natural Causes - Services Provided	Provider
	Unexpected - Services Provided	Provider
Exploitation	All	Provider
	Medical Responsibilities/ Resources	Provider and County ID Program/AE
	Room & Board	Provider and County ID Program/AE
	Unpaid Labor	Provider and County ID Program/AE
Neglect	All	Provider
Rights Violation	All	Provider
	Unauthorized Restrictive Procedure	Provider and County ID Program/AE
Serious Injury	Injury, Accidental	Provider
	Injury, Unexplained	Provider
	Choking	Provider
	Pressure Injury (Decubiti, Pressure Ulcer, Pressure Sore, Bedsore)	Provider
Sexual Abuse	All	Provider
Suicide Attempt	All	Provider

(55 Pa. Code §§ 2380.17, 2390.18, 6100.402, 6400.18, 6500.20)

¹See Attachment II, Incident Management Bulletin Category and 55 Pa. Code §§ 6100.401-6100.402 Crosswalk.

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Services for Individuals with An Intellectual Disability or Autism Incident Report Form

In the event that the Department's information management system is unavailable, the submission of incidents is to occur by completing the *Services for Individuals with an Intellectual Disability or Autism Incident Report form*. The reason why the incident is not entered in the Department's information management system should be included on the form. All incidents submitted using this form must be entered into the Department's information management system as soon as possible after resolution of the issue(s) that prevented entry.

When an incident requires investigation, Greene Arc, Inc.'s Point Person assures that a Certified Investigator is designated to conduct the investigation. The County/APS may determine a need to conduct their own investigation following review of Greene Arc, Inc.'s investigation or based upon an analysis of incidents and trends.

CERTIFIED INVESTIGATORS

Certified Investigators are people who have been trained according to ODP specifications and received a certificate in investigation from ODP. Providers, Counties and ODP are to have Certified Investigators available to conduct investigations. To be a Certified Investigator, a person must:

- 1) Be a high school graduate
- 2) Be 21 years of age or older
- 3) Meet the criminal background requirements of the Older Adults Protective Services Act, Child Protective Services Act and Child Protective Services Law
- 4) Successfully complete the training

Training and testing will be required for certification as an Investigator. Persons who have taken the course, "Conducting Serious Incident Investigation" after October 1, 1998 offered by Labor Relations Alternatives, Inc. may apply to take a test to be certified without needing to retake the course. Only those who pass the test will be certified.

Certification is good for three (3) years. At least once every three (3) years, Certified Investigators must participate in a refresher class to be recertified. Investigators must have conducted a minimum of three (3) investigations since being certified. Certification may be withdrawn by ODP for cause.

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INVESTIGATION PROTOCOL

At a minimum, the investigation protocol will include a process for addressing a conflict of interest, establishing the purpose of the investigation, interviewing, gathering evidence, weighing credibility and reporting findings and conclusions.

The investigation record includes the Incident Report, evidence, witness statements and the Certified Investigator's report. The investigation record is to be secured and separate from the individual's record. A summary of the Investigator's report is to be entered into the standardized web-based Incident Report. Families and individuals are to be notified of the outcome of all investigations.

DATA AND INFORMATION ANALYSIS

Greene Arc Inc.'s Role

Trend analysis is one of the critical uses of the data which accumulate when incidents are reported and documented in a database. Trend analyses provide the Agency, the County and ODP with insights into specific issues that can be gained from the review of individual reports. As part of an ongoing risk management/quality improvement process, Greene Arc, Inc. may choose to examine a different question and/or analyze a specific trend at regular intervals. Some suggested areas for trend analysis are listed below. This is not an all-inclusive list.

- 1) The same things happening to the same individual(s) over a period of time
- 2) Different things happening to the same person over time
- 3) The same things happening across groups over time
- 4) Involvement of the same staff
- 5) Cluster of incidents that are outside of the norm
- 6) Variations from the norm over time
- 7) Variables that impact on incidents
- 8) Impact of place, time, etc.
- 9) Nature of injury
- 10) High occurrence by type (locked in vehicles, left at site unattended by para transit, etc.)
- 11) Low or no reporting
- 12) Typical risk or atypical risk

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- 13) Process analysis/time needed to bring closure
- 14) Causes of hospitalization (including psychiatric diagnosis)
- 15) Causes of death (especially those that are sudden and unexpected)
- 16) Positive findings after allegations
- 17) Impact of changes on subsequent rate and events
- 18) Comparison of staff vacancy rate with rate/type of incidents
- 19) Comparison of variables (turnover rate, use of overtime)
- 20) Average number of incidents per person supported (changes over time, locales)
- 21) Changes in rate of incidents as models of support change
- 22) Agency issues (increase in medication errors since... etc.)

Greene Arc, Inc.'s review process shall include review of all Incident Reports and investigation. Incident Reports are to be reviewed individually to determine if Greene Arc, Inc.'s action has been appropriate and sufficient. They are to be reviewed in aggregate to determine if trends may be developing that warrant further intervention for the individual or systemic intervention beyond what may have been taken in response to the individual incident. Greene Arc, Inc.'s administrative responses may include, but are not limited to referral to the Health Care Quality Unit, revision of an individual plan or any other action necessary to promote the health, safety and rights of individuals served by the Provider. Using system generated data, Greene Arc, Inc. completes and files quarterly reports with the County within thirty (30) days of the end of the calendar quarter that include:

- 1) Incidents per month by individual and by site
- 2) Summary comparisons to prior four quarters
- 3) Incidents requiring investigation by individual and site
- 4) Results of investigations (confirmed, unconfirmed and inconclusive)
- 5) Actions to be taken in response to the conclusion/determination
- 6) Analysis of increases/decreases in numbers and types of incidents from previous quarter and previous year by individual and by location
- 7) Analysis of individuals with three (3) or more incidents during the reporting period to detect patterns or connections
- 8) Analysis of significant factors that may influence the data
- 9) Qualitative analysis of investigations conducted
- 10) Analysis of the implementation of corrective actions during reporting period
- 11) Discussion of special areas of concerns identified in the review process

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COUNTY ID PROGRAM/AE REVIEW PROCESS

§ 6000.971 County Review Process

The County ID Program/AE is responsible for reviewing and approving incidents within the timeframes and requirements outlined in this bulletin.

- Within 24 hours of the submission of the first section of the Incident Report, County ID Program/AE incident Reviewers must complete an initial management review of the incident to determine if appropriate actions were taken to protect the individual's health, safety and rights. This includes, but is not limited to:
 - Communicating with the Entity that entered the incident to request and obtain additional information, if necessary, to adequately explain and assess the actions taken to protect the health, safety and rights of the individual
 - Additional information must be documented in the management review document in the Department's information management system
 - Contacting the Entity that entered the incident to communicate any concerns identified during the management review and to ensure that actions were taken to remediate the identified concern
 - Actions taken must be documented in the management review document in the Department's information management system
- After the Provider or SCO submits the final section of the Incident Report, County ID Program/AE Incident Reviewers must perform a management review within 30 days. Specifically, County ID Program/AE Incident Reviewers must ensure:
 - The incident categorization is correct.
 - A service location, Provider type and service delivery model are correct.
 - An investigation occurred when required.
 - Target(s) are identified per this bulletin.
 - No identifying information that pertains to another individual receiving services is included in the Incident Report.
 - All incident management timelines have been met and if they have not, corrective actions related to a failure to meet timelines are in the Incident Management Report.
 - An administrative review of the investigation occurred.
 - The investigation determination is consistent with the investigation information entered by the CI.
 - Proper safeguards are in place to reduce the risk of recurrence of an incident.

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- The Incident Report contains:
 - Documentation of the actions taken to protect the health, safety and rights of the individual(s) upon discovery of the incident.
 - An accurate description of the incident and enough details to explain the event.
 - Discharge and follow-up information related to medical services if the incident involved medical care.
 - Documentation that all required notifications of the incident occurred.
 - Documentation that corrective action(s) in response to the incident has or will take place, including those that involve actions related to the target(s).
 - Investigation information that contains enough details to explain the process used by the investigator.
- A review, analysis and comparison are conducted with the copy information related to death incidents that has been provided by the Provider and/or SCO and the Incident Report information in the Department's information management system.
- All issues identified and communicated to the County ID Program/AE by the SCO reviewing/monitoring the incident have been addressed.

When the Incident Report contains all required elements, the County ID Program/AE Incident Reviewer will give the report a status of *approved*. Otherwise, the report will be given a status of *not approved* and sent back to the submitting Entity for correction.

§ 6000.972 ODP Regional Office Review Process

Within 24 hours of the submission of the first section of the Incident Report, designated ODP Regional Office staff is to review the incident to determine that appropriate action to protect the individual's health, safety and rights occurred. In the event that the appropriate actions have not taken place, the ODP Regional Office staff should immediately communicate their concerns to the appropriate Provider/Entity and County staff.

After the County approves the Incident Report, Regional ODP staff is to perform a management review within 30 days. The ODP Regional Office will conduct the management review process so that at least 90 percent of the County-approved Incident Reports are approved or not approved within 30 days. The management review process is to review the full report, including the County's response, and approve or not approve the Incident Report. This process will include a determination that:

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- a) The appropriate action to protect the individual's health, safety and rights occurred.
- b) The incident categorization is correct.
- c) A Certified Investigation occurred when needed.
- d) Proper safeguards are in place.
- e) Corrective action in response to the incident has/will take place.

APPENDIX E

INCIDENT MANAGEMENT PROCESS

Greene Arc, Inc. shall:

- 1) Promote the health, safety and rights and enhance the dignity of individuals receiving services.
- 2) Develop Provider-specific policy/procedures for incident management.
- 3) Develop and implement written policies and procedures for incident management that:
 - Meet the requirements of all applicable laws, regulations, policies and procedures related to incident management.
 - Support the collaboration with appropriate stakeholders to:
 - Mitigate individual risk(s);
 - Mitigate Agency-wide risk(s);
 - Promote health, safety and rights for all individuals;
 - Implement incident management, risk management and quality management activities
 - Require that the security of investigation files and evidence be maintained.
 - Ensure that person(s) designated by the individual listed in the ISP are notified about incident management activities as indicated by the individual.
 - The ISP should also contain information about what incidents and circumstances the person(s) designated by the individual should be notified. For example, if the individual only wants the person(s) designated for certain types of incidents.

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- Require the release to individual and person designated by the individual upon request of the Incident Report, or a summary of the incident, the findings and actions taken, redacted to exclude information about another individual and the Reporter, unless the Reporter is the individual who receives the report (55 Pa. Code §§ 2380.17, 2390.18, 6100.401, 6400.18, 6500.20).
 - Assure implementation of appropriate preventative and additional corrective action for incidents.
 - Require education of the individual, staff and others based on the circumstances of incidents (55 Pa. Code §§ 2380.19, 2390.19, 6100.405, 6400.20, 6500.22).
 - Mandate that monthly incident data monitoring and three-month trend analysis of incident data be conducted.
 - Require that individual and systemic changes based on quality and risk management analysis be identified and implemented (55 Pa. Code §§ 2380.19, 2390.19, 6100.405, 6400.20, 6500.22).
 - Explain how documents and complaints about a service that are related to incident management or the investigation process should be received from the individual and persons designated by the individual and how complaints should be documented and managed (55 Pa. Code § 6100.51).
 - The policy must ensure that there is no retaliation or threat of intimidation relating to the filing of the complaint or during the investigation of a complaint.
 - Require the evaluation of the quality of investigations through the Certified Investigator Peer Review (CIPR) process.
 - Ensure that individuals, families and persons designated by the individual are offered education and information about incident management policies and procedures and that it is presented in a format that meets their communication needs.
- 4) Ensure that staff have, at a minimum, orientation and annual competency-based training on the following topics enumerated in 55 Pa. Code §§ 2380.38-2380.39, 2390.48-2390.49, 6100.142-6100.143, 6400.51-6400.52, 6500.47-6500.48:
- How to recognize, respond to, report and prevent incidents.
 - The prevention, detection and reporting of abuse, suspected abuse and alleged abuse in accordance with the Older Adults Protective Services Act (35 P.S. §§ 10225.101-10225.5102), the Child Protective Services Law (23 Pa. C.S. §§ 6301-6387), the Adult Protective Services Act (35 P.S. §§ 10210.101-10210.704) and applicable Protective Services regulations.
 - Individual rights

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- The safe and appropriate use of behavior supports if the person works directly with an individual
 - The application of person-centered practices, community integration, individual choice and assisting individuals to develop and maintain relationships
 - Job related knowledge, skills and implementation of the ISP with consideration for such topics as:
 - Trauma informed care
 - Risk mitigation
- 5) Ensure that staff and others associated with the individual have proper orientation and training to respond to, report and prevent incidents.
 - 6) Provide ongoing training to individuals and families on the recognition of abuse and neglect.
 - 7) Ensure that when incidents occur that affect a person's health, safety or rights, that the people who are present take prompt action to protect the person's health, safety and rights. This includes separation of the target when the individual's health and safety are jeopardized. This separation shall continue until an investigation is completed. In addition, the target shall not be permitted to work directly with any other service recipient during the investigation process. When the target is another individual receiving supports or services, and complete separation is not possible, the Provider shall institute additional protections and notify the responsible person designated in Provider policy.
 - 8) Assign trained individual(s) Point Person(s) to whom incidents are reported when they occur and who will make certain that all immediate steps to assure health and safety have been implemented and follow the incident through closure.
 - 9) Contact appropriate law enforcement Agencies when there is suspicion that a crime has occurred.
 - 10) Respond to concerns from individuals/family members about the reporting and investigation processes.
 - 11) Create an incident management process which:
 - (a) Designates an individual with overall responsibility for incident management.

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- (b) Considers possible immediate and long-term effects to the individual resulting from an incident or from multiple incidents.
- (c) Uses trend analysis to identify systemic issues.
- (d) Periodically assesses the effectiveness of the incident management process.
- (e) Monitors quality and responsiveness of all ancillary services (such as health, therapies, etc.) and acts to change vendors or subcontractors or assists the individual to file available grievances or appeals procedures to secure appropriate services.

County ID Programs/AEs shall:

- Develop and implement written policies and procedures for incident management that:
 - Ensure that incidents are reviewed and approved in accordance with the timeframes and requirements outlined in this bulletin and the Consolidated, Community Living, P/FDS and Adult Autism Waivers.
 - Meet the requirements of all applicable laws, regulations, policies and procedures related to incident management.
 - Support the collaboration with appropriate stakeholders to:
 - Mitigate individual risk(s);
 - Mitigate Agency-wide risk(s);
 - Promote health, safety and rights for all individuals;
 - Implement incident management, risk management and quality management activities.
 - Require that the security of investigation files and evidence must be maintained.
 - Require the evaluation of the quality of investigations through the CIPR process.
 - Ensure that individuals, families, guardians, advocates and staff who have a direct role in incident management are provided, at least annually, and more often if necessary, in a format that meets the communication needs of the audience, education, training and information about:
 - Incident management policies and procedures;
 - Rights, roles and responsibilities for health and welfare.
 - Ensure that periodic trend analysis is completed by each Provider to identify potential systemic issues related to health and welfare.
 - Ensure Providers and SCOs are provided with ODP's standardized and approved training curriculum on how to identify and report critical incidents and reasonable suspicions of abuse, neglect and exploitation.

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- Ensure ongoing training and technical assistance as needed, that relates to the needs of individuals served by the Provider. This shall include coordination of training resources to be provided by Entities other than the County ID Program/AEs, when necessary.
- Explain how documents and complaints about a service that are related to incident management or the investigation process should be received from the individual and persons designated by the individual and how complaints should be documented and managed.
 - The policy must ensure that there is no retaliation or threat of intimidation relating to the filing of the complaint or during the investigation of a complaint.

THE OFFICE OF DEVELOPMENTAL PROGRAMS COMPONENTS

- 1) Promote the health, safety, rights and dignity of individuals receiving services
- 2) Create an incident management review process which:
 - (a) Maintains the statewide data system.
 - (b) Analyzes data for statewide trends and issues.
 - (c) Identifies issues and initiates systemic changes and provides periodic feedback.
 - (d) Evaluates County and Provider reports and analysis of trends.
- 3) Monitor implementation of this bulletin
- 4) Support Providers and counties with appropriate training to meet the mandate of the bulletin
- 5) Certify Investigators
- 6) Provide support and technical assistance to counties to implement the Incident Reporting system
- 7) Conduct Certified Investigations
- 8) Analyze the quality of investigations

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- 9) Respond to concerns from individuals/families about the reporting and investigation processes
- 10) Review and revise this bulletin as needed
- 11) Ensure compliance with all applicable laws, regulations and policies
- 12) Coordinate with other Agencies as necessary

APPENDIX F

RELATED LAWS, REGULATIONS AND POLICIES

The requirements and expectations for incident management and reporting detailed in this bulletin are related to a variety of laws, regulations and policies. The applicable licensing regulations (and facilities licensed under those regulations) include:

Related Laws

- The Mental Health and Intellectual and Developmental Disability (formerly MR) Act of 1966 (50 P.S. §§ 4101-4704)
- Title XIX Social Security Act (42 U.S.C.A. §§ 1396-1396r)
- 18 Pa. C.S. § 2713 (relating to the neglect of care-dependent person)
- The Child Protective Services Law (23 Pa. C.S. §§ 6301-6385)
- The Older Adults Protective Services Act (35 P.S. §§ 10225.101-10225.5102)
- Elder Care Payment Restitution Act (35 PS §§ 10226.101-10226.107)
- Early Intervention Services System Act (11 P.S. §§ 875.101-875.503)
- The Whistleblower Law (43 P.S. §§ 1422-1428)

Title 55 of the Pennsylvania Code

- Chapter 20 – Relating to Licensure or Approval of Facilities and Agencies
- Chapter 2380 – Relating to Adult Training Facilities
- Chapter 2390 – Relating to Vocational Facilities
- Chapter 3490 – Relating to Child Protective Services
- Chapter 3800 – Relating to Child Residential and Day Treatment Facilities
- Chapter 5310 – Relating to Community Residential Rehabilitation Services for the Mentally Ill

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- Chapter 6400 – Relating to Community Homes for Individuals with Intellectual and Developmental Disability
- Chapter 6500 – Relating to Family Living Homes
- Chapter 6600 – Relating to Intermediate Care Facilities for the Mentally Retarded
- Chapter 11 – Relating to Older Adult Daily Living Centers

Title 6 of the Pennsylvania Code (Aging)

- Chapter 3 – Fair Hearings and Appeals
- Chapter 5 – Age Preference
- Chapter 11 – Older Adult Daily Living Centers
- Chapter 15 – Protective Services for Older Adults
- Chapter 20 – Family Caregiver Support Program
- Chapter 21 – Domiciliary Care Services for Adults
- Chapter 22 – Pharmaceutical Assistance Contract for the Elderly
- Chapter 30 – Designation and Redesignation of Area Agency on Aging
- Chapter 35 – Area Agency on Aging Advisory Councils

Related Policy Guidelines

- Medical Assistance Bulletin: Revised Medical and Treatment Self-Directive Statement: Your Rights as a Patient In Pennsylvania: Making Decisions About Your Care and Treatment (effective June 19, 1998)
- Intellectual and Developmental Disability (formerly MR) Bulletin 00-98-08: Procedures for Substitute Health Care Decision Making (effective November 30, 1998)
- Intellectual and Developmental Disability Bulletin (formerly MR) 00-94-32: Assessments: Lifetime Medical History (effective December 6, 1994)
- Intellectual and Developmental Disability Bulletin 00-03-01: Passage of Act 171 Relating to the Older Adults Protective Services Act (OAPSA)

ADDITIONAL REPORTING

In addition to the reporting methodologies described in this statement of policy, the following is provided as a guide to assist in identifying additional reporting. This does not fully define, nor is it intended to substitute for, the applicable statutes and regulations.

Reportable incidents involving individuals who reside in facilities licensed as ICF/MRs (both state and privately-operated) are to be reported to the appropriate Regional Field Office of the

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Pennsylvania Department of Health, Division of Intermediate Care Facilities.

Reportable incidents that occur in facilities licensed by ODP involving individuals whose support needs are not funded through the Commonwealth or County Intellectual and Developmental Disability systems, are to be reported to whoever funds the individual's support and to the Commonwealth/Regional Office of Intellectual and Developmental Disability. This includes individuals from other states, individuals who are funded by Agencies not part of the Intellectual and Developmental Disability system and individuals whose support needs are privately funded.

Neglect of Care-Dependent Person (Title 18 Pa. C.S. § 2713)

The neglect of care-dependent person 18 Pa. C.S. § 2713 covers any adult who, due to physical or cognitive disability or impairment, requires assistance to meet his/her needs for food, shelter, clothing, personal care or health care. 18 Pa. C.S. § 2713 extends to certain listed

facilities and to home health services provided to care-dependent persons in their residence. The statute criminalizes intentional, knowing or reckless conduct by a caregiver which results in bodily injury or serious bodily injury to a care-dependent person by the failure to provide treatment, care, goods or services necessary to preserve the health, safety or welfare of the care-dependent person for whom the caregiver is responsible to provide care. A caregiver may also be prosecuted if he/she intentionally or knowingly uses a physical restraint, a chemical restraint or medication on a care-dependent person or isolates that person, contrary to law or regulation, such that bodily or serious bodily injury results.

Anyone aware of possible violations of this may make a report to the appropriate law enforcement authorities. The reporting requirements of this bulletin are to be followed even if a report of a possible violation of this statute is made to law enforcement authorities. Copies of the statute were distributed via Intellectual and Developmental Disability (formerly MR) Bulletin 00-95-25, issued December 26, 1995 and Intellectual and Developmental Disability (formerly MR) Bulletin 00-97-06, issued August 29, 1997.

The Child Protective Services Law (23 Pa. C.S. §§ 6301-6385)

The Child Protective Services Law (CPSL) establishes procedures for the reporting and investigation of suspected child abuse. Certain types of suspected child abuse must be reported

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to law enforcement officials for investigation of criminal offenses. Children under the age of 18 are covered by the Act, including those who receive supports and services from the Intellectual and Developmental Disability system. Providers covered within the scope of this bulletin are required to report suspected child abuse in accordance with the procedures established in the CPSL and the Protective Services Regulations. The CPSL defines child abuse as any of the following when committed upon a child under 18 years of age by a parent, person responsible for a child's welfare, an individual residing in the same home as a child or a paramour of a child's parent:

- Any recent act or failure to act that causes non-accidental serious physical injury
- Any act or failure to act that causes non-accidental serious mental injury, sexual abuse or sexual exploitation
- Any recent act, or series of such acts, or failures to act that creates an imminent risk of serious physical injury, sexual abuse or sexual exploitation
- Serious physical neglect constituting prolonged or repeated lack of supervision or the failure to provide essentials of life, including adequate medical care, which endangers a child's life or development or impairs the child's functioning

Reports of suspected abuse are received by the Department of Human Services' (DHS) Childline and Abuse Registry (800-932-0313), which is the central register for all investigated reports of abuse. Individuals who come into contact with children, in the course of practicing their profession, are required to report when they have reasonable cause to suspect, on the basis of their medical, professional or other training or experience, that a child is an abused child. Every facility or Agency is required by the CPSL to funnel reports to the Director or a designee to be promptly reported to Childline. The reporting, investigation and documentation requirements of this Intellectual and Developmental Disability Bulletin must also be followed when a report of suspected child abuse is made. It must be noted that the definition of abuse found in the CPSL differs greatly from the definition promulgated in this bulletin. Because of this difference, it is possible that an allegation may be "unconfirmed" in terms of the CPSL but still substantiated with reference to these guidelines. Likewise, the scope of reports subject to investigation differs so it is important to be familiar with the requirements of the CPSL.

The Older Adults Protective Services Act (35 P.S. §§ 10225.101-10225.5102)

The Older Adults Protective Services Act (OAPSA) of 1987 was enacted to protect all Pennsylvanians age 60 and older. The OAPSA established a detailed system for reporting and investigating suspected abuse, neglect, exploitation and abandonment for care-dependent individuals. Act 13 was signed into law in 1997 as an amendment to the OAPSA. Unlike the

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other provisions of OAPSA that applied only to adults age 60 and above, Act 13 applied to adults age 18 and above who were considered “care-dependent” individuals and to individuals under age 18 if they resided in a facility serving individuals over 18. Employees or administrators of a covered Entity reported suspected abuse incidents to the local Area Agency on Aging (AAA), where indicated, to the Pennsylvania Department of Aging and to local law enforcement, pursuant to Chapter 7 of the OAPSA. These requirements existed in addition to the reporting procedures contained in this Bulletin. In 2002, the OAPSA was further amended by the Elder Care Payment Restitution Act.

The Elder Care Payment Restitution Act (35 P.S. §§ 10226.101-10226.107)

The Elder Care Payment Restitution Act eliminated the requirements of Act 13 for which suspected abuse of individuals with Intellectual and Developmental Disability under the age of 60 was reported to the Area Agency on Aging, and in some cases, to the Department of Aging. This Act became effective February 9, 2003.

Health Insurance Portability and Accountability Act of 1996 (HIPAA) (Public Law 104-191)

HIPAA and the applicable regulations at 45 CFR Parts 160 and 164 (Privacy Rule) established a set of national standards for the protection of personal health information. The Privacy Rule addresses the use and disclosure of individuals’ health information or “protected health information” by organizations subject to the Privacy Rule or “covered Entities.” The Privacy Rule establishes standards for individuals’ rights to understand and control how their personal health information is used. The U.S. Department of Health and Human Services, Office of Civil Rights is responsible to implement and enforce the Privacy Rule.

Greene Arc, Inc. will report and investigate any incidents as appropriate and file reports with the funding Agencies such as OVR, School District, etc.

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ATTACHMENT I

FAMILIES

Greene Arc, Inc. provides support to the following areas:

- Vocational Training Services
- Adult Training Facility Services
- Supported Employment
- Employment Services
- Residential Community Group Homes
- Advocacy
- Semi-Independent Living
- Respite Care
- Psych Rehabilitation
- Mental Health Peer Specialists
- Representative Payee
- Agency Transportation Services

Greene Arc, Inc. joins families in concern about the health and safety of their relatives, who receive supports and services through its licensed and funded programs. This policy specifies the process for Greene Arc, Inc. to report and investigate incidents that jeopardize the health and safety of individuals receiving services. In addition to the requirements placed on those providing and overseeing services, Greene Arc, Inc. also relies on families to report incidents that may affect the family member's health and safety.

This attachment to the policy provides an easy guide for families of individuals who receive supports and services both out of the home and in the family's home.

Notification to Families

Family members of individuals who receive services outside the family home have a right to receive timely, accurate and complete information regarding their relative's health and safety.

Unless otherwise indicated by your family member receiving services outside the family home:

- You will be notified of any reportable incidents.
- You will be notified within twenty-four (24) hours of occurrence or when they are discovered.

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- You will be notified of the outcome of any investigation when it is complete.

Notification of Incidents by Families

- 1) If a family member observes or suspects abuse, neglect or any inappropriate conduct, whether services are provided out of the home or in the home, they should contact the County Supports Coordinator and may also contact ODP directly at 1-888-565-9435.
- 2) In the event of a death, the family is to notify the Supports Coordinator. The Supports Coordinator assumes the role of the Point Person, as described in this manual.

When Services Are Provided in the Family's Home

An increasing number of individuals are supported in their own homes or the homes of their families. When services are provided in the home of an individual or his/her family:

- 1) Provider employees or their contract Agents are to report incidents involving the individual receiving services that occur when they are present in the house.
- 2) Greene Arc, Inc. or their contract Agents report possible abuse of which they become aware regardless of whether they are present at the time or whether it involves a paid caregiver.
- 3) If the families observe inappropriate conduct, they should contact the Supports Coordinator to initiate an Incident Report or they may also contact ODP directly at 1-888-565-9435.

When a family reports questionable conduct that may constitute abuse, an investigation is to be conducted by a Certified Investigator. Families are encouraged to cooperate to assure fairness and accuracy of the report.

When the Family is the Provider of Service

When a family member is the Provider (i.e., is identified in the individual plan as the Provider), and is receiving remuneration, all incidents needing investigation by the Provider are to be reported to the Supports Coordinator, who will initiate an Incident Report.

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In the event that the family Provider is the target of an investigation, the family Provider may request that the County assign a Certified Investigator, unrelated to the target, that is also a family member of a person with Intellectual and Developmental Disability.

When Individuals and Families Purchase Community Service

Greene Arc, Inc. supports individuals in OVR, GED, Community Integration, Area Agency on Aging, etc. If families or others become aware of abuse or neglect involving such Entities or organizations, a report of the incident is to be made to their Supports Coordinator or ODP at 1-888-565-9435.

Families and individuals may purchase service from community organizations and individual people who are not licensed or otherwise regulated by ODP, who have no contractual relationship with the County and who are, therefore, not covered by this bulletin. These include such Entities as YM/WCA's, community recreational programs, adult education programs and clubs. If individuals or family members become aware of abuse or neglect involving such Entities or organizations, a report of the incident is to be made to their Supports Coordinator or ODP at 1-800-565-9435.

Incidents Involving Children 18 and Under

Currently, Greene Arc, Inc. doesn't support any persons under the age of 18. If Greene Arc, Inc. were to provide services to underage clients, then the local police would become involved as well as the Supports Coordinator with any act of abuse or neglect which constitutes criminal conduct under the Child Protective Services Law.

Reporting Deaths

Death of a family member can be an emotionally trying time, and the sympathies of the people who are responsible to administer supports and services must be extended to family members at such times. Family members are to notify the Supports Coordinator of the death of an individual receiving service as soon as possible.

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ATTACHMENT II

**PENNSYLVANIA DEPARTMENT OF HEALTH LIST OF REPORTABLE DISEASES
(Pa. Code, Title 28, Chapter 27)**

1) AID (Acquired Immune Deficiency Syndrome)	26) Malaria
2) Amebiasis	27) Measles
3) Animal Bite	28) Meningitis – All types
4) Anthrax	29) Meningococcal Disease
5) Botulism	30) Mumps
6) Brucellosis	31) Pertussis (Whooping Cough)
7) Campylobacteriosis	32) Plague
8) Cancer	33) Poliomyelitis
9) Chlamydia Trachomatis Infections	34) Psittacosis (Ornithosis)
10) Cholera	35) Rabies
11) Diphtheria	36) Reye’s Syndrome
12) Encephalitis	37) Rickettsial Disease (incl. Rocky Mtn. Spotted Fever)
13) Food Poisoning	38) Rubella (German Measles) & Congenital Rubella Syndrome
14) Giardiasis	39) Salmonellosis
15) Gonococcal Infections	40) Shigellosis
16) Guillain-Barre Syndrome	41) Syphilis – All Stages
17) Haemophilus Influenza Type B Disease	42) Tetanus
18) Hepatitis, Non-A, Non-B	43) Toxic Shock Syndrome
19) Hepatitis Viral, incl. Type A and B	44) Toxoplasmosis
20) Histoplasmosis	45) Trichinosis
21) Kawasaki Disease	46) Tuberculosis – All Forms
22) Legionnaires Disease	47) Tularemia
23) Leptospirosis	48) Typhoid II
24) Lyme Disease	49) Yellow Fever
25) Lymphogranuloma Venereum	

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Please note that the list of legally reportable diseases in Pennsylvania is subject to change (work is in progress to modify the regulation to match more recent public health policy and science). Also, please note that certain broad categories such as #13 ("Food Poisoning") and #28 ("Meningitis – all types") should be construed to mean all such illnesses, even if the etiology is either not otherwise listed here, or a specific etiology cannot be determined. Similarly, acute Hepatitis C infections should be reported under the authority of #18 ("Hepatitis Non-A, Non-B") and Ehrlichiosis should be reported under the authority of #37 ("Rickettsial Diseases"). And finally note that local jurisdictions may require reports of additional conditions not listed within their jurisdictions.

In addition to the diseases listed above, CDE requests the voluntary reporting of either laboratory identification of, or illness caused by, the following pathological agents: (1) E. coli 0157:H7 and other verotoxin-producing (enterohemorrhagic) E. coli, (2) Cryptosporidium, (3) Cyclospora, (4) Hantavirus, (5) Hemolytic uremic syndrome (a likely marker of infection with verotoxin-producing E. coli), (6) Invasive disease due to Group A Streptococcus (such as necrotizing gastritis, but not pharyngitis) and (7) *Listeria monocytogenes*.

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ATTACHMENT III

VICTIMS ASSISTANCE PROGRAM

Victims Assistance programs and services are resources available to assist individuals physically, emotionally, financially, medically and legally when the individual is abused or neglected or a victim of a crime. Individuals may access many resources available through Victims Assistance programs even if they do not intend to file criminal charges or proceed within the criminal justice system.

- Victims have the right to access Victims Assistance programs and services at any time. Individual Support Plan (ISP) team members should offer Victims Assistance directly to the individual. Direct assistance means that the victim is present when options are discussed and offered. Victimization should not be taken lightly, as any type of incident can cause emotional, psychological, physical, financial and behavioral consequences for individuals. Signs of trauma from an incident may or may not be present immediately after an event. Victims Assistance should be offered more than once to ensure that individuals have the full opportunity to process an event and decide the support(s) they wish to access.
- In Pennsylvania, there is a strong network of Victims Assistance programs, sometimes called "Victim/Witness Units" that can provide help to victims after abuse, neglect, financial exploitation, domestic violence, sexual assault, simple and aggravated assault, harassment, theft and homicide. Some programs are based in the criminal/juvenile justice system and aid victims as their cases move through those systems. Other programs are provided by community-based nonprofits, including domestic violence shelters and rape crisis centers, which offer services regardless of whether a victim pursues charges or if the case moves forward for prosecution. All Victims Assistance services are free.
- Many of the supports available to victims of abuse, neglect or a crime include an advocate. Victims Assistance programs employ specialized advocates to carry out the functions related to their organization. A victim may work with multiple advocates depending on identified needs.
- Victims have the right to effective communication through supports, such as interpreter services, language line, sign language interpreters and TTY capabilities.

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- The most common providers of Victims Assistance are local rape crisis centers, domestic violence centers and the Office of Victims Services.

Community-Based Victims Services

Community-based Agencies, such as domestic violence shelters and rape crisis centers, can provide services regardless of whether the victim decides to press charges or if the crime goes through the criminal justice system. Every county in Pennsylvania is covered by domestic violence and rape crisis programs. Some counties also have a general, nonprofit Agency that provides services to all crime victims.

Services Offered by Domestic Violence Shelters

- **Confidential Hotlines**
 - Available 24 hours a day, 365 days a year
 - Provide counseling, crisis intervention, support, information and referrals
- **Shelter**
 - 24-hour emergency shelter
 - Safe homes
 - Transitional housing
- **Counseling**
 - Empowerment counseling
 - Options counseling (identifies victim choices, assesses risks and benefits)
 - Safety planning (assessment of risk and danger, strategies for enhancing safety, identification of potential resources)
 - Support groups
- **Advocacy**
 - Legal advocacy (legal options, preparation and assistance with Protection From Abuse (PFA) forms and filings)
 - Medical advocacy (based in hospitals, clinics)
 - Children's advocacy (counseling, therapeutic art, music and play for children in shelters)
 - Accompaniment (legal services, court proceedings, other Service Providers)
- **Economic Support**
 - Aid in obtaining cash assistance and employment training
 - Help with securing safe, affordable, permanent housing
 - Job training and identification of employment opportunities

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Services Offered by Rape Crisis Centers

- Free and confidential crisis counseling, 24 hours a day
- Prevention education programs for schools, organizations and other public groups
- Services for the victim's family, friends, partner or spouse
- Information and referrals to other services in the victim's area
- Advocates that are available to accompany victims of sexual violence, rape or incest to medical facilities, the police station and court
- Advocates that can intervene or act on behalf of the victim's wishes or needs and assist in navigating the processes within the medical, police and court systems

System-Based Victim Service Agencies (Victim/Witness Programs, Office of Victims Services)

Each county in Pennsylvania has a program that provides services to victims of crime if the case proceeds through the criminal justice system. These programs are usually located in the County's District Attorney's Office or the Juvenile Probation Office. Once charges are filed, someone from the County program that provides services to victims of crime will usually be in contact with the victim to initiate services. Information provided to the victim may include the following:

- The victim's rights as a crime victim
- How to register for an offender release notification
- How to receive notification of the right to provide input regarding any release of the alleged perpetrator
- The victim's right to receive compensation
- How to find an advocate
- How to obtain counseling or therapy
- How the legal process works
- How to register for court notifications
- How to receive notification of the alleged perpetrator's escape, recapture or any custody change
- How to arrange for court accompaniment
- Assistance with the victim impact statements
- An explanation of post-sentencing/dispositions
- How to obtain medical advocacy and accompaniment
- How to receive notification of execution

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RESOURCES:

The National Domestic Violence Hotline

1-800-799-SAFE (7233)

TTY: 1-800-787-3224

PA Coalition Against Domestic Violence (PCADV)

1-800-932-4632

TTY: 1-800-553-2508

www.pcadv.org

National Sex Abuse Hotline

1-800-656-HOPE (4673)

PA Coalition Against Rape

1-800-692-7445

www.pcar.org

To see a listing of programs by county, visit the Pennsylvania Office of Victims Services website:

<http://pcv.pccd.pa.gov>.

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APPENDIX J

INCIDENT MANAGEMENT CONTINGENCY PLAN

In the event that the Department's information management system is unavailable, the submission of incidents is to occur by completing the *Services for Individuals with an Intellectual Disability or Autism Incident Report* form, specifically pages 1 and 2 of Attachment 5 of this policy. The reason why the incident is not entered in the Department's information management system should be included on the form. All incidents submitted using this form must be entered into the Department's information management system as soon as possible after resolution of the issue(s) that prevented entry. Submit via fax to the appropriate office.

CONTACT INFORMATION:

ODP Regional Office

Fax Numbers:

Northeast Region: (570) 963-3177
Southeast Region: (215) 560-3043
Central Region: (717) 772-6483
Western Region: (412) 565-5479

ODP Regional Office

Phone Numbers:

Northeast Region: (570) 963-4749
Southeast Region: (215) 560-2245
Central Region: (717) 772-6507
Western Region: (412) 565-5144

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APPENDIX K

STANDARDIZED INCIDENT REPORT

FIRST SECTION (completed within 24 hours)

The First Section is to include the following information:

DEMOGRAPHICS (pre-populated from EIM demographics)

- Name of the individual involved/affected by the incident
- Individual's Base Service Unit (BSU) number
- County of registration
- Gender
- Individual's date of birth
- IDD diagnosis
- Home address of the individual
- Living arrangement of the individual
- Name and address of the reporting Entity
- Location where the incident occurred
- Name of the Point Person

CATEGORIZATION

- Date and time the incident was recognized/discovered
- Primary and secondary category of the incident
- Determination if an investigation is required or desired
- Name of the Certified Investigator assigned, if the incident requires investigation

HEALTH AND SAFETY ASSURANCE

- Description of the immediate and subsequent steps taken by the Point Person or other representatives of the Provider to ensure the individual's health, safety and response to the incident, including date, time and by whom those steps were taken.
- If the individual is not registered with a County IDD/BH Program, the report is to list the county or state where the person is/was a resident.

INCIDENT DESCRIPTION

Narrative description of the incident completed by staff or other person(s) who were present when the incident occurred or who discovered that an incident had occurred.

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FINAL SECTION (completed within 30 days)

The reporting Entity will complete the Final Section of the Incident Report within 30 days from the date of the incident or of the date the Provider learns of the incident (unless an extension has been made). The Final Section will retain all of the preceding information from the First Section and will add:

- Name of the Initial Reporter
- Name of the individual's Supports Coordinator (pre-populated)
- Whether CPR was administered
- Whether abdominal thrusts were administered
- If 911 was called, the time, date and person who called
- If the incident involves an illness or injury, the name of the Practitioner/facility by whom the individual was treated initially, the date and time of the initial contact with a Healthcare/Medical Practitioner, the nature/content of the initial treatment/evaluation and the nature of, date of, time of and Practitioner involved in any subsequent treatments, evaluations
- In the event of a death, indication if the individual was in hospice care, had a diagnosis of terminal illness, if a "Do Not Resuscitate" order was in effect, if the coroner was contacted, if an autopsy has been or will be performed
- Identification of all persons to whom the incident notification has been (or will be) submitted (i.e., family, law enforcement Agency), the date the notification has been made and the person who has/will notify the necessary parties
- Update of incident description, as needed
- Specific description of any injury received by the individual
- Present status of the individual in reference to the incident
- Identification of other persons who may have witnessed or been directly involved in the incident
- Specific signs and symptoms of any illness (acute or chronic) which may be contributory to the incident
- Any relevant background information on the individual, including medical history and diagnoses
- Date on which the investigation began, if required
- Summary of the investigator's findings and conclusions, if required
- If the incident involves an allegation of abuse or neglect, the conclusion reached on the basis of the investigation (i.e., the allegation is confirmed, not confirmed, inconclusive) and the status of the target

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Providers may summarize the narrative description, but the written statements of the person(s) directly involved are to be available for review, if needed.

Description of the steps taken by the Provider in response to the conclusions reached as a result of the investigation:

- If the incident involves an injury of unknown origin, confirmation of the cause (if one has been identified) and steps taken to prevent recurrence.
- Description of any changes in the individual's plan of support necessitated by or in response to the incident.
- Verification by the Provider that all necessary corrective actions have been identified.
- If any corrective action cannot/has not been completed by the time the Final Section is submitted, the expected date of completion must be provided along with the identity of the person responsible for carrying the extended action through to completion.
- If the nature of the incident requires contact with local law enforcement, the name and department/office of the person(s) contacted, the date of the contact, the name of the person who initiated the contact and a description of any steps taken by law enforcement officials.
- If the individual has been hospitalized, the date of admission, name of the hospital, the admitting diagnosis(es), indication if the admission was from the emergency room, what occurred during the hospitalization, change in voluntary/involuntary status, the date of discharge, the discharge diagnosis(es), an indication that the Hospital Discharge Instructions were provided, what changed after discharge, current status and any plans for subsequent medical follow-up.
- If the individual is deceased, the Final Section is to be supplemented by a hard copy of the following:
 - a. Lifetime medical history
 - b. Copy of the death certificate
 - c. Autopsy Report, if one has been completed
 - d. Discharge Summary from the final hospitalization if the individual died while hospitalized
 - e. Results of the most recent physical examination
 - f. Most recent health and medical assessments
 - g. Name of the family member notified of the results of the investigation, if required
 - h. The incident classification the Provider believes is most appropriate
 - i. The date and time the Provider believes is most appropriate

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After final submission by the Provider, the County and ODP will perform a management review and close the incident.

Documents that are not immediately available must be forwarded to the appropriate parties (County and/or ODP Regional Office) as they become available. If, after attempting to acquire the document, it is determined to be unobtainable, the expecting party will be notified.

Incident Management Bulletin Category and 55 Pa. Code §§6100.401-6100.402 Crosswalk

Incident Management Bulletin Incident Primary and Secondary Categories		55 Pa. Code § 6100.401 Types of Incidents	55 Pa. Code § 6100.402 Incident Investigation
Primary Category	Secondary Category	Pa. Code Reporting Category	Pa. Code Investigation Category
Abuse	Physical	Abuse, including abuse to an individual by another individual.	Abuse, including abuse to an individual by another individual.
Abuse	Psychological	Abuse, including abuse to an individual by another individual.	Abuse, including abuse to an individual by another individual.
Abuse	Misapplication/Unauthorized use of restraint (injury)	Abuse, including abuse to an individual by another individual.	Abuse, including abuse to an individual by another individual.
Abuse	Misapplication/Unauthorized use of restraint (no injury)	Abuse, including abuse to an individual by another individual.	Abuse, including abuse to an individual by another individual.
Abuse	Seclusion	Abuse, including abuse to an individual by another individual.	Abuse, including abuse to an individual by another individual.
Behavioral Health Crisis Event	Community Based Crisis Response	Law enforcement activity that occurs during the provision of a service or for which an individual is the subject of a law enforcement investigation that may lead to criminal charges against the individual.	Not applicable

Incident Management Bulletin Incident Primary and Secondary Categories		55 Pa. Code § 6100.401 Types of Incidents	55 Pa. Code § 6100.402 Incident Investigation
Primary Category	Secondary Category	Pa. Code Reporting Category	Pa. Code Investigation Category
Behavioral Health Crisis Event	Facility Based Crisis Response	Law enforcement activity that occurs during the provision of a service or for which an individual is the subject of a law enforcement investigation that may lead to criminal charges against the individual.	Not Applicable
Behavioral Health Crisis Event	Immediate Arrest and Incarceration Crisis Response	Law enforcement activity that occurs during the provision of a service or for which an individual is the subject of a law enforcement investigation that may lead to criminal charges against the individual.	Not Applicable
Behavioral Health Crisis Event	Psychiatric Hospitalization (involuntary)	Inpatient admission to a hospital	Not Applicable
Behavioral Health Crisis Event	Psychiatric Hospitalization (voluntary)	Inpatient admission to a hospital	Not Applicable
Death	Natural Causes - Services Provided	Death	Death that occurs during the provision of a service

Incident Management Bulletin Incident Primary and Secondary Categories		55 Pa. Code § 6100.401 Types of Incidents	55 Pa. Code § 6100.402 Incident Investigation
Primary Category	Secondary Category	Pa. Code Reporting Category	Pa. Code Investigation Category
Death	Unexpected - Services Provided	Death	Death that occurs during the provision of a service
Death	Natural Causes - Only Supports Provided	Death	Not Applicable
Death	Unexpected - Only Supports Provided	Death	Not Applicable
Exploitation	Misuse/Theft of Funds	Theft or misuse of individual funds	Theft or misuse of individual funds.
Exploitation	Failure to Obtain Informed Consent	Exploitation	Exploitation
Exploitation	Material Resources	Exploitation	Exploitation
Exploitation	Medical Responsibilities/ Resources	Exploitation	Exploitation
Exploitation	Missing/Theft of Medications	Exploitation	Exploitation
Exploitation	Room and Board	Exploitation	Exploitation
Exploitation	Unpaid Labor	Exploitation	Exploitation

Incident Management Bulletin Incident Primary and Secondary Categories		55 Pa. Code § 6100.401 Types of Incidents	55 Pa. Code § 6100.402 Incident Investigation
Primary Category	Secondary Category	Pa. Code Reporting Category	Pa. Code Investigation Category
Fire	Fire with Property Damage	Fire requiring the services of the fire department. This provision does not include false alarms.	Not Applicable
Fire	Fire with Property Damage	Fire requiring the services of the fire department. This provision does not include false alarms.	Not Applicable
Law Enforcement Activity	Individual charged with a crime/under police investigation	Law enforcement activity that occurs during the provision of a service or for which an individual is the subject of a law enforcement investigation that may lead to criminal charges against the individual.	Not Applicable

Incident Management Bulletin Incident Primary and Secondary Categories		55 Pa. Code § 6100.401 Types of Incidents	55 Pa. Code § 6100.402 Incident Investigation
Primary Category	Secondary Category	Pa. Code Reporting Category	Pa. Code Investigation Category
Law Enforcement Activity	Licensed service location crime	Law enforcement activity that occurs during the provision of a service or for which an individual is the subject of a law enforcement investigation that may lead to criminal charges against the individual.	Not Applicable
Missing Individual	In Jeopardy	An individual who is missing for more than 24 hours or who could be in jeopardy if missing for any period of time.	Not Applicable
Neglect	Failure to provide medication management	Neglect	Neglect
Neglect	Failure to provide needed care	Neglect	Neglect
Neglect	Failure to provide protection from hazards	Neglect	Neglect
Neglect	Failure to provide needed supervision	Neglect	Neglect
Neglect	Moving violation	Neglect	Neglect

Incident Management Bulletin Incident Primary and Secondary Categories		55 Pa. Code § 6100.401 Types of Incidents	55 Pa. Code § 6100.402 Incident Investigation
Primary Category	Secondary Category	Pa. Code Reporting Category	Pa. Code Investigation Category
Passive Neglect	Inability to provide necessities	Neglect	Not Applicable
Passive Neglect	Inability to provide medical/personal care	Neglect	Not Applicable
Rights Violation	Civil/legal	A violation of individual rights	A violation of individual rights
Rights Violation	Communication	A violation of individual rights	A violation of individual rights
Rights Violation	Health	A violation of individual rights	A violation of individual rights
Rights Violation	Privacy	A violation of individual rights	A violation of individual rights
Rights Violation	Services	A violation of individual rights	A violation of individual rights
Rights Violation	Unauthorized Restrictive Procedure	A violation of individual rights	A violation of individual rights
Self-Neglect	Medical	Neglect	Not Applicable
Self-Neglect	Environmental	Neglect	Not Applicable
Self-Neglect	Personal Care/Nutrition	Neglect	Not Applicable
Self-Neglect	Other	Neglect	Not Applicable