

ADMINISTRATIVE POLICY

- 1 General Instructions
 - 1.1 Incident reports will be completed for all employee and accidents involving supported persons, as well as other unusual occurrences/special incidents in any program. The incident report will be completed by the staff persons observing the incident.
 - 1.2 Upon review by the Chief Executive Officer (CEO) and/or Chief Operating Officer (COO), unusual occurrences/special incidents will be reported to the Department of Social Services or Department of Public Health as required. The CEO and/or COO will provide direction for making such reports.
 - 1.3 For all instances of suspected or alleged abuse, follow instructions in "Abuse Reporting Policy" #200.5.2.
 - 1.4 All incident reports must be completed by all of the witnessing staff person(s) before the end of their work shift. If there are extenuating circumstances, and only with the permission of the supervisor, manager or on-call staff, the report may be completed at a later time, not to exceed 24 hours following the time of the incident.
 - 1.5 If an incident occurs while persons are being transported, the witnessing staff person/s will complete the incident report as soon as the vehicle reaches an OPTIONS site, and the report will be submitted to the on-site supervisor at that location.
 - 1.6 No reprisal will be taken against a person filing an incident report.
- 2 The following guidelines are to be used to determine whether an incident report is required. When in doubt, complete the incident report and submit it to the on-site supervisor.
 - 2.1 Incident reports must be completed for falls, bruises, overt signs of injury (observed or unobserved), injuries requiring emergency room visits and/or hospitalization (e.g. fractures, deep lacerations, and ingestion of foreign objects), elopement or walk-aways, vehicular accidents, unauthorized use or possession of licit or illicit substances, medication errors, death, attempted suicide, aggressive or violent acts, use or possession of weapons, incidents where physical restraints or seclusion are used, incidents where criminal action is alleged, accusations of abuse, or any action which might become newsworthy or initiate a legal action or adverse community reaction.

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- 2.2 Occurrences such as epidemic or communicable disease outbreaks, incidents of involving infection control, poisonings, fires, major accidents, deaths from unnatural causes bio-hazard accidents or other catastrophes and unusual occurrences which threaten the welfare, safety or health of persons served, personnel or visitors will be reported by either the Chief Operating Officer or Program Manager within 24 hours either by telephone (with written confirmation) or by fax to the local health officer and the appropriate regulatory bodies.
 - 2.3 Every fire or explosion that occurs on OPTIONS premises will be documented and reported by either the CEO or COO within 24 hours to the local fire authority:
- 3 Procedure for Completing Incident Reports
- 3.1 Employee completing Incident Report will:
 - 3.1.1 Enter supported person's name, sex and age.
 - 3.1.2 Record the date of admission to the program and the date and time of incident.
 - 3.1.3 Account for the incident by describing its specific location, any injury findings, staff observations and supported person's overall condition.
 - 3.1.4 Indicate the time police, administrative staff, physician and/or family were notified of the incident and of subsequent response.
 - 3.1.5 List the witness(es) to the incident. Include address and phone number if witness is not an OPTIONS' employee or supported person.
 - 3.1.6 If there is more than one party involved in the incident, such as in cases of verbal or physical altercation, observing staff person will write an incident report for each party directly involved in the incident. This includes any staff person involved in the altercation, especially if there is direct physical contact.
 - 3.1.7 If more than one staff person has direct knowledge of the incident, i.e. sees or hears it, then one incident report may be written as long as all staff members agree to the content and sign as witnesses. If

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there is disagreement as to the written statement, then each staff person must make out a separate report.

3.1.8 Sign and date the report.

3.2 The Program Manager will be responsible for the following administrative follow-up action:

3.2.1 Physician's Reports: Indicate any instructions from the physician.

3.2.2 Submit reports on injury incidents to the Registered Nurse Consultant for follow-up action.

3.2.2.1 Registered Nurse Reports: The Registered Nurse will indicate any instructions on the incident report then submit the report to the Program Director or Manager for review, who will in turn return the report to the CEO and/or the COO.

3.2.3 Forward a copy of the incident report to the referral/funding source case manager if applicable.

3.2.4 Forward the original within 24 hours to Administrative offices for review.

3.2.5 Contact the COO or CEO immediately if there is a question of possible abuse or a question of the need to report to a licensing agency.

4 Procedure for completing Incident Reports when there is injury to the employee.

4.1 Employee involved in the incident and/or employee completing incident report will:

4.1.1 Report incident to the Supervisor, Program Manager or on-call staff and/or COO on the day of the incident, before leaving the program premises.

4.1.2 Complete Unusual Incident Report Form and Worker's Compensation Report Form with all available information regarding the incident.

4.1.3 Supervisor will ensure that the completed original Incident Report

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and (if needed) Worker's Compensation Report forms are submitted to the COO within 24 hours of the incident.

4.2 The COO will:

4.2.1 File a report with the OPTIONS Worker's Compensation Insurance carrier.

4.2.2 Provide the employee with a copy of the Worker's Compensation Report form.

4.2.3 Place all reports in the employee's Worker's Compensation file.

5 Accident Reports

5.1 The Safety and Infection Control Committee will review all accident reports monthly. Recommendations for correcting the conditions causing the accident will be discussed and implemented.

6 Summary of Follow-up Action to Incident Reports

6.1 Necessary action taken at the time of the incident: Notification of police, emergency services, etc.

6.2 Supervisor, Program Manager and/or COO reviews incident report and records follow-up action.

6.3 The original written incident report is submitted to the Administrative Offices within 24 hours of the incident.

6.4 Within 24 hours of the incident the CEO and/or COO will determine whether notification of outside regulatory agencies (Department of Public Health, Department of Social Services, Adult Protective Services, Child Protective Services, etc.) is required.

6.5 Copies of report are faxed or mailed to outside regulatory agencies when applicable.

6.6 The original incident report is placed in its corresponding administrative file.

7 Incident Investigation Procedure

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- 7.1 The CEO or the COO, upon notification of a special incident, unusual occurrence or alleged abuse, will initiate an investigation. The CEO, or COO, may appoint an investigator whose responsibility it will be to gather facts that are reported on the Incident Investigation Report form. This form will be completed within 48 hours and returned to the CEO or COO, unless an extension is granted by either the CEO or COO. All active investigation files will be kept in the COO's office.

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