

**GOVERNMENT OF THE DISTRICT OF COLUMBIA  
DEPARTMENT ON DISABILITY SERVICES**



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| <b>Title/Subject: Immediate Response Committee (IRC) Procedure</b>                     |
| Cross-References: Incident Management and Enforcement Policy and Procedure; IRC Policy |

All underlined words/definitions can be found in the Definitions Appendix.

**1. PURPOSE**

The purpose of this procedure is to describe the process for reviewing all reported incidents and issues as defined by the Department on Disability Services (“DDS”), Developmental Disabilities Administration (“DDA”), pursuant to the Immediate Response Committee (IRC) Policy. The IRC serves as the central point of review for incidents and issues reported to or by DDA.

**2. APPLICABILITY**

The following procedures apply to all DDA employees, subcontractors, providers/vendors, consultants, volunteers, and governmental agencies that provide services and supports on behalf of individuals with disabilities receiving services as part of the DDA Service Delivery System. These procedures will govern how DDA providers develop, implement, and monitor behavior support plans for the individuals they serve.

**3. PROCEDURES**

The following sections establish procedures and protocols for implementation of the Immediate Response Committee (IRC) policy.

I. Incident Review Process

The IRC meets daily to review incidents that were reported within the last 24-hour period or since the last meeting in the case of a weekend or holiday.

1. The committee reviews the “descriptions of events” and “actions taken” to determine whether an incident meets the criteria of an incident and if it is classified as defined in the IMEU policy. If the committee determines:
  - a. The report (1) presents a clear and complete picture of the incident and the provider’s response and (2) is classified correctly, the committee will accept the incident; or
  - b. The incident was not classified correctly; the committee may re-classify the incident in accordance with the Incident Management and Enforcement Unit (IMEU) policy. The IRC will enter an incident note in MCIS to explain why the incident was re-classified and accept the report; or
  - c. The information reported is incomplete or unclear; the committee will request additional information. The IRC will enter an incident note in MCIS to detail their questions and follow-up needed. The IRC facilitator (or designee) is responsible for

- completing the follow-up and reporting back to the IRC the next business day so the committee can determine that the report is accepted or requires additional action.
2. The IRC must evaluate if the person is currently safe (related to this specific incident) and if the provider has taken reasonable steps to promote the health, safety and welfare of the person for all incidents, whether serious reportable or reportable.
  3. The IRC must determine if DDA should take additional action to protect and promote the person's health, safety, and welfare.
  4. All accepted serious reportable incidents (SRIs) are assigned to IMEU for investigation.
  5. Incidents that require follow-up separate and distinct from the investigation will be assigned to the appropriate division. All follow-up must be documented in the individual's case notes regardless of the DDA Division assignment. The Service Coordinators must enter a note within 24 hours of the reported incident confirming that steps have been taken to ensure the person's immediate health and welfare.
  6. The committee compares the date of the incident with the date it was reported to ensure the report was submitted in the required 24 hours or by the next business day. The committee also confirms that the appropriate notifications have been made per the Incident Management and Enforcement Policy, and if it determined that one or more notifications have not been made, takes action to have such notifications made and documents those actions in the IMEU record.
  7. The IRC will monitor all providers to ensure all providers are reporting in accordance with established DDA reporting. If the report was not submitted on time, the IRC will review the provider's reporting history for the past quarter. If the IRC determines there is a pattern of late reporting, the IRC will cause an issue to be entered in MCIS to be followed up by Operations/Provider Resource Management.

## II. Issue Review Process

In the daily meetings the IRC reviews any issues that were generated over the last 24-hour period or since the last meeting. The committee reviews the issue description to assess the urgency of the issue, who or what is impacted by the issue, and to identify who is responsible for facilitating resolution and when it should likely be resolved.

1. The committee accepts, modifies or asks for more information for each issue.
  - a. If the issue is clear and complete, the IRC accepts the issue.
  - b. If the committee determines the issue would be better addressed as an incident, the committee will change the issue to an incident and explain in the IRC notes, why they modified the issue.
  - c. If the committee needs more information, the IRC facilitator (or designee) will detail in the IRC issue notes in MCIS what follow-up is necessary, conduct the follow-up and report back to the committee the next business day so the committee can determine if the issue is now accepted or if other action is warranted.
2. The reporter may designate an issue as "High". The committee reviews the issue reported to assess the need to respond urgently. If the issue requires immediate action and/or presents a potential risk to the health, safety and welfare of person(s) supported, the committee may accept the reporter's recommendation or the committee may choose to designate the issue as "High"

3. The reporter may designate an issue as an Unmet Need. The committee reviews the issue reported to ensure it meets the definition of an Unmet Need.
4. The committee evaluates the issue to determine if the issue is specific to an individual, is part of a pattern of issues or reflects a systemic issue. The committee may designate the issue as an individual issue or a provider issue.
5. When the issue is related to adaptive equipment, the IRC will ensure first that the person's health and safety are addressed. If there are concerns about health and safety, the IRC will designate it as High and assign an acceptable timeframe to mitigate the risk.
6. The IRC will enter a due date of 60 days after the identification of the need for the acquisition or repair of adaptive equipment.
7. The committee ensures the issue is classified by domain and sub-domain.
8. The committee assigns the issue to the appropriate DDA personnel for follow-up.
9. The IRC evaluates the timeline for completion based on urgency and complexity of follow-up and assigns a due date.

### III. Supervisory Review of Issue Closure

As part of ensuring the quality of the closing of issues, that staff are actively working on issues and ensuring appropriate timely closures are occurring supervisors are responsible for reviewing open and closed issues with direct reports.

1. Each Supervisor will have on their dashboard a report that identifies all the open, closed, and past due issue.
2. During monthly supervision with staff, the supervisor will review 10 % of closed issues to review for quality closure, and timeliness. If the issue has been closed unsatisfactorily, a note will be sent to the Quality Management Division Director, and the Manager for the Quality Enhancement/Improvement Unit who will reopen the issue. This information will be documented on the supervision notes.
3. During monthly supervision with staff, the staff person will identify issues that are not resolving satisfactorily, and if the staff person is experiencing barriers. The supervisor will follow up with the Provider to ensure responsiveness, and/or may enter a provider issue in the system due to lack of responsiveness which will be assigned to the Resource Staff assigned to that provider.

### IV. Tracking and Trending

The IRC is charged with tracking and trending incident and issue data to discover patterns, identify trends for individuals and providers and to inform DDA Senior Management of patterns and trends.

1. During daily meetings, the IRC members use MCIS to identify patterns for individuals and providers.
  - a. The committee may look at past incidents, notes, and other data to explore patterns and the ISP Team's/Provider's response to patterns.
  - b. If the committee becomes aware of a pattern for an individual or provider, the IRC will determine if the pattern is an incident or an issue.

- c. If the pattern represents an incident, the IRC facilitator (or designee) will report the incident in MCIS and to the Director of QMD. The committee will follow the procedure for incidents.
  - d. If the pattern represents an issue, the IRC will report the issue in MCIS and to the Director of QMD. The committee will follow the procedure for an Issue.
  - e. If the committee suspects there may be a pattern but they do not have sufficient information, the IRC facilitator (or designee) will be assigned to research the concern and report the concern to the Director of QMD. The IRC facilitator will report back to the committee within three working days.
2. At least bi-weekly, the IRC Core Team will meet to review data from incidents and issues.
- a. The IRC Core Team Members
    - i. will be a representatives from the divisions within DDS;
    - ii. serve a minimum of 6 consecutive months and only one team member can be replaced each month; and
    - iii. be willing and able to analyze data for the purpose of creating learning.
  - b. This Core Team reviews data for the past three (3) months to include frequency, types of incidents, unmet needs, domains/sub-domains, issues that are re-opened, and other variables to identify individual and systemic patterns and trends.
  - c. If the committee becomes aware of a pattern for an individual or provider, the committee will determine if the pattern is an incident or an issue.
  - d. If the pattern represents an incident, the IRC facilitator (or designee) will report the incident in MCIS and to the Director of QMD. The committee will follow the protocol for incidents.
  - e. If the pattern represents an issue, the IRC will report the issue in MCIS and to the Director of QMD. The committee will follow the protocol for an Issue.
  - f. If the committee suspects there may be a pattern but they do not have sufficient information, the IRC facilitator (or designee) will be assigned to research the suspicion and report the suspicion to the Director of QMD. The IRC facilitator will report back to the committee by the next weekly meeting.
  - g. For each quarter of the fiscal year, the IRC facilitator will prepare a summary data report for the committee to review, analyze and make recommendations to the QIC and the Director of QMD.
  - h. Minutes will be taken during the biweekly and quarterly IRC data analysis reviews for submission to the QMD as part of the DDS/DDA Quality Management Plan.

#### V. Switching Assignments of Issues:

The IRC is responsible for assigning the issues to the responsible person in the appropriate division. Once assigned, the Division Director or supervisor is responsible for ensuring that any changes when a staff person is on extended leave (longer than 30 days), changes roles, responsibilities or exits employment.

- 1. The staff person's supervisor will re-assign all open issues to the covering, or new employee.
- 2. The original due date will remain noted in the system as well as the employee the issue was originally assigned.

3. The timeline for the employee being assigned will be equal to the original timeline (i.e. if the due date was in 10 days, the new assignment will also be given 10 days)
4. If an issue is identified as a high priority issue, the issue may only be reassigned to the Supervisor for resolution. Typically these high priority issues require resolution in 24 hours to 5 days.