

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



PROCEDURE	
Subject: Incident Recommendations	Procedure No.: 2015-DDS-QMD-PR02
Responsible Program or Office: DDS Quality Management Division	Effective Date: March 2, 2015
	Number of Pages: 4
Supersedes: Incident Recommendations dated June 1, 2013	
Cross References, Related Policies and Procedures, and Related Documents: Incident Management and Enforcement policy, Incident Reporting procedure, Incident Investigation procedure, Incident Prevention, Management and Quality Improvement procedure, Time Frames for IMEU Recommendations, Immediate Response Committee Policy and Procedures, Mortality Reporting Committee Policy and Procedures, Reportable Incident Definitions, Abuse and Neglect Fact Sheet, DDS/DDA Investigation Quality Review Rating Scale, Provider Certification Review Policy, Imposition of Sanctions Policy, Enhanced Monitoring Procedures, Imposition of Adaptive Equipment Sanctions Procedures, Watch List Procedures	

1. PURPOSE

The purpose of this procedure is to delineate Department on Disability Services (“DDS”) and provider responsibilities and establish a standardized process for follow-up and enforcement of incident recommendations. Implementation of incident recommendations is an essential part of an incident management system, necessary to protect health and safety, mitigate risk of reoccurrence, and to improve overall the quality of services and supports through incident follow-up, and data tracking, trending and analysis.

2. APPLICABILITY

This procedure applies to all DDS employees, subcontractors, providers/vendors, consultants, volunteers, and governmental agencies that provide services and supports to people with disabilities through the Developmental Disabilities Administration (“DDA”) service delivery system, funded by DDA and/ or the Department of Health Care Finance (“DHCF”).

3. PROCEDURES

A. DDS Investigation Recommendations

1. After the DDS/DDA Incident Management Enforcement Unit (“IMEU”) completes an investigation, the assigned IMEU Investigator may make and enter recommendations into the MCIS Investigation and Reporting System.
2. Each recommendation will have an assigned time for implementation based on the severity of the incident and the need to protect the people DDS/DDA supports from harm. The dates for implementation may range from one (1) day to 60 days, with the time starting from when the provider receives the report. The time frames will be communicated at the time the recommendations are issued. Please see the attached “Time Frames for IMEU Recommendations,” which sets the timeline for many common IMEU recommendations.
3. The provider will receive an email notification that the recommendation and due date are available in the system.
4. If an extension is needed to satisfy any recommendation, the responsible provider staff should provide a written notification, via electronic mail, to the assigned Compliance Specialist. The request must be uploaded in MCIS and include the reason for the extension.
5. The assigned Compliance Specialist shall respond within two (2) business days of receiving the request for an extension.
6. All communications with the provider will be noted by the DDS/DDA staff including the compliance specialist, service coordinator or management in the MCIS Investigation and Reporting system.
7. If the investigation substantiates the allegation, the provider shall determine any disciplinary actions that may be appropriate for the provider staff.

B. Provider Implementation of Recommendations & DDS Follow-up

1. The provider will submit its plan of correction and/or supporting documentation via the MCIS Investigation and Reporting system within the established time frame.
2. The DDS/DDA Compliance Specialist will work with the provider to ensure that all recommendations from the investigation are implemented in accordance with the established time frame for the recommendation.
3. The DDS/DDA Compliance Specialist will review the information and determine compliance with the recommendation. If there is concern regarding the plan of correction or supporting documentation, the Compliance Specialist will review the

documentation with the assigned IMEU Investigator prior to entering a determination.

4. If it is determined that the plan of correction/support documentation does not meet the requirement of the recommendation, the Compliance Specialist will initiate follow up with the provider within three (3) business days to determine if technical support is needed.
5. The Compliance Specialist may conduct on-site visits to include verifying implementation of recommendations.
6. If a provider does not meet the due dates assigned in MCIS, the recommendation will remain "Open." The Compliance Specialist or MCIS will then generate an issue for follow up by IMEU. The Compliance Specialist will continue to follow-up to obtain the outstanding documentation necessary to resolve the issue.
7. After determining the status of the provider's implementation of the recommendation, the Compliance Specialist will enter the recommendation in the MCIS Investigation and Reporting system as implemented on-time, implemented but within 30 days past due, implemented but 30+ days overdue, or other. (Examples of "other" may include, but are not limited to: the person no longer receives residential support from that provider, employee (target) no longer works for provider, doctor determined recommendation was not needed, etc.)
8. The IMEU Supervisory Investigator or his /her designee will then review the case for final review/approval. Upon final review/approval, the case file will be closed or noted for additional follow up.

C. Requests for Reconsideration

1. A provider's Executive Director, or designee, may submit a written request to the IMEU Supervisory Investigator to reconsider the disposition of the investigation or the modification of any Recommendations for Corrective Action.
2. Requests for reconsideration must be signed by the provider's Executive Director and electronically mailed to the IMEU Program Assistant and the IMEU Supervisors within five (5) business days of receiving the IMEU report of investigation. The request for reconsideration must provide evidence not already considered in the investigation and justification for the reconsideration.
3. The IMEU Supervisory Investigator shall respond to all appeal requests, via electronic mail, within fifteen (15) business days of receiving the request. The IMEU Supervisory Investigator's written response shall be DDS/DDA's final administrative decision regarding the appeal.
4. Recommendations for Corrective Action may be stayed during the appeal process,

if formal request for extension is made by the provider.

D. Sanctions

1. Failure by providers to respond to recommendations may result in sanctions including, but not limited to, placement on Enhanced Monitoring and may have implications for Provider Certification Review.
2. DDS/DDA may also impose sanctions on providers who do not comply with the IMEU policy or procedures, or who have deficient performances in incident management or recommendation implementation, in accordance with DDS/DDA's Sanctions Policy and related procedures.

Attachments:

- 1) Reportable Incident Definitions
- 2) IMEU Policy
- 3) Abuse and Neglect Fact Sheet
- 4) DDS/DDA Investigation Quality Review Rating Scale
- 5) Time Frames for IMEU Recommendations