

Quality Improvement Committee (QIC) Serious Reportable and Reportable Incidents and Recommendations FY19, Quarter 1

Dianne Jackson, Supervisor, QRU Greg Coffman, Supervisor, IMEU Greg Banks, Supervisor, QRU February 5, 2019

Agenda



- Process to Review All Incidents
- Investigations
- SRI InvestigationRecommendations

Incident Reporting



Incidents come in all shapes and forms.

Something happens that is either extreme or minor that is **WITNESSED**, **DISCOVERED** or **INFORMED** by someone.

The incident reports should answer the WHO, WHAT, WHEN, WHERE, and HOW?

Mandatory Reporting to DDS



All incidents witnessed, discovered or informed by someone must be entered into DDS MCIS database before 5 p.m., the next business day for review by the Immediate Response Committee (IRC)

SEE
HEAR
SUSPECT
KNOW
something,
please

something

Abuse, Neglect and Exploitation of People with Disabilities

CAN END with YOU!

Report concerns of carelessness or mistreatment to the Department on Disability Services

202-730-1520

All calls are confidential. All reports taken seriously.







Two Types of Incidents



Reportable Incidents*

An **RI** is an event or situation involving a risk, threat or actual event that impacts a person's health or safety that includes, but is not limited to:

- 1. Emergency Relocation
- 2. Emergency Room Visit
- 3. Emergency Use of Restrictive Controls
- 4. Fire
- 5. Inappropriate Use of Approved Restraints (no injury)
- 6. Incidents Involving Police
- 7. Medication Error
- 8. Physical Injury
- 9. Property Destruction
- 10. Suicide Threat
- 11. Vehicle Accident
- 12. Other

Serious Reportable Incidents

A **SRI** is an **RI** that due to its significance, severity, or repeated instance within a period of time. SRIs include, but are not limited to:

- 1. Abuse
- 2. Death
- 3. Exploitation
- 4. Inappropriate Use of Controlled Restraints that Results in Injury
- 5. Missing Person
- 6. Neglect
- 7. Repeated use of emergency restraints
- 8. Serious Medication Error
- 9. Serious Physical Injury
- 10. Suicide attempt
- 11. Use of unapproved restraint
- 12. Unplanned or emergency room hospitalization
- 13. Other

Key Reporting Definitions



Type of Incident	Type of Incident	Definition
Emergency Room Visit	RI	A visit to an emergency room or urgent care facility that does not result in a hospital ADMISSIONS and was NOT the result of a Serious Physical Injury.
Unplanned In-patient Hospitalization	SRI	An emergency room visit resulting in hospitalization or any other unplanned hospitalization.
Medical Error	RI	Any medication error that does not require professional medical attention as a result of the error (i.e., missed dose, medication administered at the wrong time (early or late).
Serious Medication Error	SRI	Any medication error that causes or may cause harm and requires observation, or treatment by a physician, physician's assistant, or nurse practitioner in a hospital, ER, or treatment center or 3 incidents of Medication Error within 60 days.
Physical Injury	RI	Harm to a person's body that requires a nursing assessment, first aid or follow-up with a Health Care professional.
Serious Physical Injury	SRI	Any bodily injury that requires treatment that other than a nursing assessment or first aid and is not covered in the examples of physical injury (i.e., fractures, dislocations, third degree burns)

Who Should be Notified?



- DDA Service Coordinator
- 911 Emergency personnel, as needed
- The person's parent or guardian
- DDS Duty Officer (after hours)
- Non-residential service providers must report incidents to the person's residential provider, if they have one.
- DOH/HRLA for ICFs and Residential Habilitation homes at 202-442-5833.
- The Metropolitan Police Department, if the incident involved criminal misconduct, a missing person, or a death, at 202-727-9099.
- Adult Protective Services for alleged abuse, neglect or exploitation of adults occurring in a natural home, at (202) 541-3950.
- CFSA for alleged abuse, neglect or exploitation of children under 21 years old living in a natural home, at (202) 671-SAFE [(202) 671-7233].

WHO represents IRC?



DDA/DDS staff represents the Immediate Response Committee and they serve as the central point of review for all incidents entered into MCIS:

- Quality Resource Unit (Facilitator)
- IMEU (Lead or Supervisor/ Co-Facilitator)
- Health and Wellness (Nurses)



If it is identified that the person requires immediate attention, staff from IRC will make contact and provide support to the person to ensure the situation is addressed promptly.

Timely Reporting Rate FY19, Q1



	October	November	December	Total	%
On-Time	371	308	310	989	89%
Late	45	46	33	124	11%
Total	416	354	351	1113	100%

IRC Process



IRC meets <u>daily at 9 a.m.</u> to review SRIs and RIs that were reported the last business day. All details for each incident entered is reviewed to determine if it was entered (classified) correctly:

- If the incident is <u>classified</u> correctly, IRC will accept the incident.
- If the incident was <u>not classified</u> correctly, IRC may re-classify the incident and enter a note to explain and accept.
- If the information reported is <u>incomplete</u> or unclear, IRC will request additional information from the person who submitted the incident.
 - If the information provided is complete, the incident is accepted.
 Add what we do on the spot

WHO, WHAT, WHEN, WHERE, and HOW?

Total SRIs and RIs, FY19, Q1



	Total # of Incidents
Reportable Incidents	808
Emergency Relocation	41
Emergency Room or Urgent care Visit	312
Emergency use of restrictive controls	10
Fire	10
Incidents involving the police	69
Medication Error	34
Other	126
Physical Injury	131
Property Destruction	20
Suicide Threat	2
Vehicle Accident	53
Serious Reportable Incidents	305
Abuse	30
Death	7
Exploitation	13
Inappropriate Use Of approved restraints that results in injury	2
Missing Person	12
Neglect	68
Other	3
Serious Medication Error	8
Serious Physical Injury	51
Unplanned or emergency inpatient hospitalization	110
Use of unapproved restraints	1
Grand Total	1113

Total SRIs and RIs by Facility Type



DISABILITY SERVICES

Facility Type (FY19, Q1)	Total
Community Residential Facility	1
Department of Behavioral Health/Sup Living	4
Hospital	2
Host Home	16
Institution	1
Intermediate Care Facility	169
Natural Home	128
Natural Home/Supported Living	3
Nursing Home	5
Out Of State Placement	5
Residential Habilitation	100
Supported Living	679
Total	1113

Assignment of Investigations



- All SRIs appear on the Provider, Service Coordinator (assigned to the person), and the Supervisor's dashboard.
- IMEU Investigators have 40 calendar days to complete their investigation.
- Investigators are required to conduct an on-site visit within 72 hours of assignment for abuse, neglect, serious physical injury, and exploitation.
- Providers must immediately remove staff from having any contact with people receiving supports and services that are alleged to have committed abuse, neglect, or exploitation.

Outcome of SRI Investigations Closed in FY19, Q1



Type of Incident	Administ Closure	Inconclusive	Resolved-No Abuse or Neglect Found	Substant.	Substant. Abuse	Substant. Neglect	Unsubstant	Total
Abuse	2	7	1	7	0	1	13	31
Exploitation	2	4	0	4	1	1	1	13
Inappropriate Use Of approved restraints that results in injury	1	0	0	0	1	1	0	3
Missing Person	2	0	10	0	0	1	0	13
Neglect	13	1	1	32	0	0	15	62
Other	0	0	2	0	0	1	0	3
Serious Medication Error	2	0	6	0	0	1	0	9
Serious Physical Injury	3	2	35	0	0	6	0	46
Suicide Attempt	0	0	0	0	0	0	0	0
Unplanned or emergency								
inpatient hospitalization	3	1	101	0	0	1	0	106
Use of unapproved restraints	0	0	1	0	0	0	0	1
Total:	28	15	157	43	2	13	29	287

Note: 15 SRI investigations are pending completion of the 305 SRIs accepted in FY19, Q1.

SRI Investigation Recommendations



- At the completion of each investigation by IMEU, the Compliance Specialists enters the recommendations into MCIS.
- Each recommendation has a range from 1 – 60 days to address.
- Compliance Specialists works with the provider to ensure all recommendations from the investigation are implemented timely.

Status of Recommendations Closure, FY19, Q1



Recommendation Status	Total
Implemented but within 30 days past due	13
Implemented on time	210
Total	223

Data represents 68 providers and 223 incidents accepted in FY18 and FY19.

When in doubt...



If you are not sure whether something is an INCIDENT you are still required to enter the incident into MCIS and IRC will review the incident to make the determination if it should be accepted.



Next Steps



- Reviewing and revising our Policies and Procedures on Incident Management.
- Applying with partners with a grant opportunity from the Department of Justice for Training and Services to End Violence Against Women with Disabilities.
- Identifying additional data points for incident outcomes and recommendations for further analysis.
- What would like to see in our next quarterly report?







DDS may impose sanctions on providers who do not comply with the IMEU policy or procedures, or who have deficient performances in incident reporting in accordance with the DDS Imposition of Provider Sanction Procedure, March 2014.

Meeting people's needs is not about compliance, but rather about ensuring human rights are protected.



Protesters in the disability rights movement.

Courtesy of Google Images.

Contact us with any concerns



Immediate Response Committee (IRC) Supervisor

Dianne Jackson, Supervisor, Quality Resource Unit

dianne.jackson3@dc.gov

202-664-7471

Serious Reportable Incident (SRI) Investigator Supervisor

Greg Coffman, Supervisor Investigator

Greg.coffman@dc.gov

202-615-9420

SRI Recommendations Supervisor

Greg Banks, Supervisor, Quality Resource Unit

Gregory.banks@dc.gov

202-870-9778