<u>SUBJECT:</u> Incident Reporting - Programs certified by: Office of People with Developmental Disabilities (OPWDD), Office of Mental Health (OMH), and Office of Alcoholism and Substance Abuse Services (OASAS).

EFFECTIVE DATE: June 1st, 2014

REVISION HISTORY:

Date	Description of Change
7/11/2023	Reviewed and re-formatted

SCOPE:

All OPWDD, OMH, and OASAS certified programs operated by FREE, Inc. In addition, any unlicensed or non-certified programs operated by Family Residences and Essential Enterprises, Inc. under OPWDD and OASAS.

PURPOSE:

To ensure that all Reportable Incidents and Notable Occurrences are reported, completed properly, submitted timely and investigated (if necessary) before presentation to the Incident Review Committee.

POLICY:

All agency employees, interns, volunteers, consultants, contractors, and family care providers are required to report any event or situation that meets the criteria of a Reportable Incident, Notable Occurrence, Event/Situation, or any other event as required by regulation or Family Residences and Essential Enterprises, Inc. All employees of FREE are mandated reporters and are also required to report Reportable Incidents to the Vulnerable Persons' Central Registry when applicable.

An Incident Review Committee (IRC) will be established to review Reportable Incidents and Notable Occurrences to ascertain that they were reported, managed, investigated (if necessary) and trended, and make recommendations to prevent reoccurrence of similar events.



A. Procedures:

- 1. Upon initial witness or report of a potential reportable incident, safeguards should be implemented immediately in order to ensure the safety of the people FREE supports. In order to effectively implement those safeguards, notification must be made to an Operations Team Member.
- 2. Upon discovery, all Reportable Incidents, Notable Occurrences, Events/Situations, or any other event as required by Family Residences and Essential Enterprises, Inc. shall be immediately reported and all appropriate notifications made timely as mandated in the Part 624, 524, 440.150, and 836 regulations. This includes all Jonathan's Law notifications and the documentation of unsuccessful attempts made to contact all parties.
 - i. Discovery of an incident is defined as the moment when there is reasonable cause to suspect that an incident has occurred. Provided that appropriate safeguards have been implemented, it may be appropriate to communicate with a senior administrator, a member of the Incident & Investigatory Services department at FREE or the point of contact established by OPWDD, OMH, or OASAS in order to obtain guidance on reporting requirements and jurisdiction. If any doubt exists whether an incident should be reported to the Justice Center, it should be reported to the Justice Center.
 - ii. Events reported to the Justice Center that are classified by the Justice Center as Non-NYJC will be reviewed with OPWDD, OMH, or OASAS to determine if any type of incident or occurrence should be filed. If not filed as any type of incident or occurrence the event should be reviewed at a team meeting and appropriate follow up completed to address any concerns. Documentation should also be placed into the clinical record for OASAS programs.
 - iii. If the event does not meet any regulatory definition, it does not preclude FREE from continuing investigative activities and to take actions to appropriately address the events. Ifat any time during this process an event is discovered that meets one of those regulatory definitions, it will be reported as required.
 - iv. For events which require Justice Center notification and involve multiple mandated reporters, all reporters are not required to call the Justice Center directly provided that they know the report has been already made by another mandated reporter and that they are named as a person with knowledge of the incident in the report already made to the Justice Center.
 - v. All staff members of FREE or any other agency, individuals receiving services, family members, and members of the community have the right to contact the Justice Center if they feel they have reasonable cause and may do so without fear of retaliation, regardless of any guidance they may have received.



B. Regulations

For the regulations defining the categories and types of incidents, as well as the different classification levels, refer to the following regulations:

- OPWDD:
 - Please refer to Part 624 regulations of New York Codes, Rules and Regulations (NYCRR)
- OMH:
 - Please refer to Part 524 regulations of NYCRR
- CMS:
 - Please refer to Federal Regulations 440.150
- OASAS:
 - Please refer to Part 836 regulations of NYCRR
- Justice Center:
 - Please refer to the NY Protection of People with Special Needs Act

C. Documentation

Documentation will be completed in the Incident Report and Management Application (IRMA), the New York State Incident Management Reporting System (NIMRS), the Vulnerable Persons Central Registry (VPCR) or on forms designated by OPWDD, OMH, OASAS or Family Residences and Essential Enterprises, Inc.

D. Investigations

Any report of a Reportable Incident, Notable Occurrence, Event/ Situation, or any other event as required by Family Residences and Essential Enterprises, Inc. shall be thoroughly investigated, within the required timeframes, unless OPWDD, OMH, OASAS or the Justice Center advises it will be investigated by OPWDD, OMH, OASAS or the Justice Center and specifically relieves Family Residences and Essential Enterprises, Inc. of the obligation to investigate. For more information about constitutes a thorough investigation please refer to training and guidance documents related to investigating.

- 1. All investigations will be completed within 30 days, unless there are reasonable delays, including but not limited to witnesses being unavailable, the inability to obtain documentation from outside sources, or new information being uncovered.
 - i. For ICFs, the results of all investigations will be reported to the Administrator of the ICF within 5 working days, unless there are reasonable delays, including but not limited to witnesses being unavailable, the inability to obtain documentation from outside sources, or new information being uncovered. The Administrator of the ICF will be notified of the status of the investigation should a delay occur.
- 2. An investigation is considered completed upon the completion of the investigative report. A report will be considered completed upon the investigator signing their report. Any revisions that are made from internal or external review (OPWDD,



OMH, OSAS, or the Justice Center) will be documented with additional signatures indicating the dates that revisions are made.

- 3. All investigations will be submitted within 50 days, either through IRMA, NIMRS, or WSIR, unless there is a reasonable delay.
- 4. All reports will be tracked by Incident & Investigatory Services, in order to ensure compliance with the above timeframes.
- 5. The IRC, or subcommittee, will meet on a minimum of a quarterly basis and always within one month of a Reportable Incident, Serious Notable Occurrence, or sooner, should the circumstances so warrant.
- 6. An Allegation of Abuse will not be closed until receipt of a letter from the Justice Center is received by FREE, Inc. determining the incident as closed. The IRC will ascertain closure for Significant Incidents, Serious Notable Occurrences, Minor Notable Occurrences and any other lesser event as determined by FREE, Inc.

E. Incident Policy

Any changes to this policy, and annually thereafter, will be made available in the following manner:

- 1. For persons receiving services who have the capacity to understand, parents, guardians, correspondents, or advocates, an email will be sent with a link to FREE's website, where the policy will be maintained, so that it can be reviewed at any time.
- 2. For employees, interns, volunteers, consultants, contractors, and family care providers, the policy will be reviewed and signed electronically, through FREE's electronic education program.
- 3. Training on the Justice Center code of Conduct and on incident reporting will be conducted when hired and on an annual basis with all employees.



Approved by:

	Date
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	Mark Gart

Keith Scott, MPP

Vice President of Policy & Program Development

