Incident Reporting Policy

For

*Chatham Trades, Inc.*

*August 2020*

**Incident Reporting Policy Record of Changes**

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| **Description of Changes** | **Date** | **Review/Revision by** |
| Reviewed | 5/10/2012 | Dan Stroupe |
| Reviewed | 8/31/2020 | Jessica Godfrey |
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"Incident" means any happening which is not consistent with the routine operation of a facility or

service or the routine care of a consumer and that is likely to lead to adverse effects upon a consumer.

**BOARD OF DIRECTORS POLICIES**

Chatham Trades Board of Directors shall develop and implement written policies for:

1. the use of medications by consumers in accordance with the rules in the North Carolina Administrative Code; and
2. reporting of any incident, unusual occurrence or medication error.

**CONSUMER RIGHTS COMMITTEE**

1. Chatham Trades Board of Directors shall establish a Consumer Rights Committee. The Board of Directors shall also develop and implement policy which delineates:
   1. composition, size, and method of appointment of committee membership;
   2. training and orientation of committee members;
   3. frequency of meetings, which shall be at least quarterly;
   4. rules of conduct for meetings and voting procedures to be followed;
   5. procedures for monitoring the effectiveness of existing and proposed methods and procedures for protecting consumer rights;
   6. requirements for routine reports to the board regarding restraint and
   7. other operating procedures.
2. The Consumer Rights Committee shall oversee implementation of the following consumer rights protections:
   1. compliance with G.S. 122C, Article 3;
   2. compliance with the provisions of 10A NCAC 27C, 27D, 27E, and 27F governing the protection of consumer rights, and 10A NCAC 26B governing confidentiality;
   3. establishment of a review procedure for any of the following which may be brought by a consumer, consumer advocate, parent, legally responsible person, staff or others:
      1. consumer grievances;
      2. alleged violations of the rights of individuals or groups, including cases of alleged abuse, neglect or exploitation;
      3. concerns regarding the use of restrictive procedures; or
      4. failure to provide needed services that are available in the agency.
3. Nothing herein stated shall be interpreted to preclude or usurp the authority of a county Department of Social Services to conduct an investigation of abuse, neglect, or exploitation or the authority of Disability Rights North Carolina or the local managed care organization to conduct investigations regarding alleged violations of consumer rights.
4. The Consumer Rights Committee shall be composed of a majority of non-board members, with a reasonable effort made to have all applicable disabilities represented, with consumer and family member representation. Staff who serve on the committee shall not be voting members.
5. The Consumer Rights Committee shall maintain minutes of its meetings and shall file at least an annual report of its activities with the Board of Directors. Consumers shall not be identified by name in minutes or in written or oral reports.
6. The local managed care organization’s Consumer Rights Committee shall review grievances regarding incidents which occur after Chatham Trades Board of Directors has reviewed the incident and has had opportunity to take action. Incidents of actual or alleged Consumer Rights violations, the facts of the incident, and the action, if any, made by Chatham Trades shall be reported to the director of the appropriate community operations center within 30 days of the initial report of the incident.

**MANAGED CARE ORGANIZATION MONITORING OF FACILITIES AND SERVICES**

**Scope**

1. This Section governs Managed Care Organization (MCO) monitoring of the provision of public services (including Chatham Trades’ services) in the MCO's catchment area.
2. The MCO shall monitor the provision of Chatham Trades’ services in the MCO's catchment area.
3. The MCO shall develop and implement written policies governing monitoring of the provision of these services that include:
   1. receiving, reviewing and responding to level II and level III incident reports as set forth in North Carolina Administrative Code;
   2. receiving and responding to complaints concerning the provision of these services, as set forth in North Carolina Administrative Code;
   3. conducting local monitoring of Category A and B providers of public services, including Chatham Trades, as set forth in North Carolina Administrative Code; and
   4. analyzing and reporting trends in the information identified in this policy.
4. An MCO or provider of public services (including Chatham Trades) shall exchange information, including confidential information, when necessary to coordinate and carry out the monitoring functions as set forth in this policy. Sharing of information shall conform to 42 CFR, Part 2 for persons receiving Substance Abuse Services. The exchange of information shall apply as follows:
   1. a MCO to another MCO;
   2. a MCO to a provider of public services, such as Chatham Trades;
   3. a provider of public services (such as Chatham Trades) to an MCO;
   4. a provider of public services (such as Chatham Trades) to another provider of public services;
   5. a provider of public services (such as Chatham Trades) to the Department of Health and Human Services;
   6. a MCO to the Department of Health and Human Services;
   7. the Department of Health and Human Services to an MCO; and
   8. the Department of Health and Human Services to a provider of public services, such as Chatham Trades.

**DEFINITIONS**

In addition to the terms defined in G.S. 122C-3 and this policy, the following terms shall apply to the rules in this section:

1. "Complaint investigation" means the process of determining if an allegation made against a provider concerning the provision of public services is substantiated.
2. "ICF/MR" means a facility certified for Medicaid as an Intermediate Care Facility for the Mentally Retarded.
3. "Level I incident" means the same as defined in North Carolina Administrative Code and does not meet the definition of a level II incident or level III incident.
4. "Level II incident" means the same as defined in North Carolina Administrative Code, including a consumer death due to natural causes or terminal illness, or results in a threat to a consumer's health or safety, or a threat to the health or safety of others due to consumer behavior and does not meet the definition of a level III incident.
5. "Level III incident" means the same as defined in North Carolina Administrative Code and results in:
   1. a death, sexual assault, or permanent physical or psychological impairment to a consumer;
   2. a substantial risk of death, or permanent physical or psychological impairment to a consumer;
   3. a death, sexual assault, permanent physical or psychological impairment caused by a consumer;
   4. a substantial risk of death or permanent physical or psychological impairment caused by a consumer; or
   5. a threat caused by a consumer to a person's safety.
6. "Local Monitoring" means MCO monitoring of the provision of public services in its catchment area that are provided by Category A and B providers like Chatham Trades.
7. "Monitor" or "Monitoring" means the interaction between the MCO and a provider of public services (such as Chatham Trades) regarding the functions set forth in this policy.
8. "Provider category" means the type of facility in which a consumer receives services or resides. The provider category determines the extent of monitoring that a provider receives and is determined as follows:
   1. Category A - facilities licensed pursuant to G.S. 122C, Article 2, except for hospitals. In addition to Chatham Trades, these include 24-hour residential facilities, day treatment, PRTFs and outpatient services;
   2. Category B – G.S. 122C, Article 2, community based providers not requiring State licensure;
   3. Category C - hospitals, state-operated facilities, nursing homes, adult care homes, family care homes, foster care homes or child care facilities; and
   4. Category D - individuals providing only outpatient or day services and who are licensed or certified to practice in the State of North Carolina.

**INCIDENT RESPONSE REQUIREMENTS FOR CATEGORY A and B PROVIDERS**

1. Chatham Trades shall develop and implement written policies governing our response to level I, II or III incidents. The policies shall require that Chatham Trades respond by:
   1. attending to the health and safety needs of individuals involved in the incident;
   2. determining the cause of the incident;
   3. developing and implementing corrective measures according to Chatham Trades specified timeframes not to exceed 45 days;
   4. developing and implementing measures to prevent similar incidents according to Chatham Trades specified timeframes not to exceed 45 days;
   5. assigning person(s) to be responsible for implementation of the corrections and preventive measures;
   6. adhering to confidentiality requirements set forth in G.S. 75, Article 2A, 10A NCAC 26B, 42 CFR Parts 2 and 3 and 45 CFR Parts 160 and 164; and
   7. maintaining documentation regarding steps a through f.
2. Chatham Trades is not an ICF/MR provider and is not subject to additional federal regulations in 42 CFR Part 483 Subpart I.
3. In addition to the requirements set forth in Paragraph 1 of this section, Chatham Trades shall develop and implement written policies governing their response to a level III incident that occurs while Chatham Trades is delivering a billable service or while the consumer is on Chatham Trades' premises. The policies shall require Chatham Trades to respond by:
   1. immediately securing the consumer record by:
      1. obtaining the consumer record;
      2. making a photocopy;
      3. certifying the copy's completeness; and
      4. transferring the copy to an internal review team;
   2. convening a meeting of an internal review team within 24 hours of the incident. The internal review team shall consist of individuals who were not involved in the incident and who were not responsible for the consumer's direct care or with direct professional oversight of the consumer's services at the time of the incident. The internal review team shall complete all of the activities as follows:
      1. review the copy of the consumer record to determine the facts and causes of the incident and make recommendations for minimizing the occurrence of future incidents;
      2. gather other information needed;
      3. issue written preliminary findings of fact within five working days of the incident. The preliminary findings of fact shall be sent to the MCO in whose catchment area Chatham Trades is located and to the MCO where the consumer resides, if different; and
      4. issue a final written report signed by the Executive Director within three months of the incident. The final report shall be sent to the MCO in whose catchment area Chatham Trades is located and to the MCO where the consumer resides, if different. The final written report shall address the issues identified by the internal review team, shall include all public documents pertinent to the incident, and shall make recommendations for minimizing the occurrence of future incidents. If all documents needed for the report are not available within three months of the incident, the MCO may give Chatham Trades an extension of up to three months to submit the final report; and
   3. immediately notifying the following:
      1. the MCO responsible for the catchment area where the services are provided pursuant to North Carolina Administrative Code.
      2. the MCO where the consumer resides, if different;
      3. the provider agency with responsibility for maintaining and updating the consumer's treatment plan, if different from Chatham Trades;
      4. the Department of Health and Human Services;
      5. the consumer's legal guardian, as applicable; and
      6. any other authorities required by law.

**INCIDENT REPORTING REQUIREMENTS FOR CATEGORY A AND B PROVIDERS**

1. Chatham Trades shall report all level II incidents, except deaths, that occur during the provision of billable services or while the consumer is on its premises or level III incidents and level II deaths involving the consumers to whom the provider rendered any service within 90 days prior to the incident to the MCO responsible for the catchment area where services are provided within 72 hours of becoming aware of the incident. The report shall be submitted on a form provided by the Secretary of Health and Human Services. The report may be submitted via mail, in person, facsimile or encrypted electronic means. The report shall include the following information:
   1. reporting provider contact and identification information;
   2. consumer identification information;
   3. type of incident;
   4. description of incident;
   5. status of the effort to determine the cause of the incident; and
   6. other individuals or authorities notified or responding.
2. Chatham Trades shall explain any missing or incomplete information. Chatham Trades shall submit an updated report to all required report recipients by the end of the next business day whenever:
   1. Chatham Trades has reason to believe that information provided in the report may be erroneous, misleading or otherwise unreliable; or
   2. Chatham Trades obtains information required on the incident form that was previously unavailable.
3. Chatham Trades shall submit, upon request by the MCO, other information obtained regarding the incident, including:
   1. hospital records including confidential information;
   2. reports by other authorities; and
   3. Chatham Trades’ response to the incident.
4. Chatham Trades shall send a copy of all level III incident reports to the Division of Mental Health, Developmental Disabilities and Substance Abuse Services within 72 hours of becoming aware of the incident. Chatham Trades shall send a copy of all level III incidents involving a consumer death to the Division of Health Service Regulation within 72 hours of becoming aware of the incident. In cases of consumer death within seven days of use of seclusion or restraint, the provider shall report the death immediately, as required by North Carolina Administrative Code.
5. Chatham Trades shall send a report quarterly to the MCO responsible for the catchment area where services are provided. The report shall be submitted on a form provided by the Secretary of Health and Human Services via electronic means and shall include summary information as follows:
   1. medication errors that do not meet the definition of a level II or level III incident;
   2. restrictive interventions that do not meet the definition of a level II or level III incident;
   3. searches of a consumer or his living area;
   4. seizures of consumer property or property in the possession of a consumer;
   5. the total number of level II and level III incidents that occurred; and
   6. a statement indicating that there have been no reportable incidents whenever no incidents have occurred during the quarter that meet any of the criteria as set forth above.

**INCIDENT AND DEATH REPORTING DOCUMENTATION**

Chatham Trades shall comply with the death reporting requirements specified in 10A 27G .0200,

incident response, reporting, and documentation requirements specified in 10A 27G .0600, restricted

intervention documentation specified in 10A NCAC 27E.0104, and Client Rights rules as specified in

*Client Rights in Community Mental Health, Developmental Disabilities, and Substance Abuse Services*

[APSM 95-2] and General Statute.

Reports on incidents, including deaths and the use of restrictive interventions shall be submitted as

required above, using the Incident Response Improvement System (IRIS) in accordance with state rules.

Documentation of incidents must be kept in a separate file from the clinical service record. The

occurrence of an incident shall be recorded in the service notes. However, the completed incident report

shall not be referenced or filed in the service record, but filed in administrative files.

Information related to the incident will be recorded in the record to include, a description of the event, actions taken on behalf of the consumer, and consumer’s condition following the event.

**MANAGED CARE ORGANIZATION MANAGEMENT OF INCIDENTS**

Upon learning of a level III incident that occurs while a consumer is in the care of Chatham Trades or on its premises, the MCO shall respond by:

1. determining that necessary actions have been taken to protect the consumer's health and safety;
2. determining the consumer records are secured as set forth above;
3. determining that a meeting of an internal review team is convened within 24 hours as set forth above;
4. ensuring the consumer's legal guardian, as applicable, and other authorities are notified as set forth in this policy;
5. reviewing the internal review team's preliminary findings and final report;
6. considering any internal review team's request for an extension of up to three months to file the final report, if necessary to gather all relevant documents; and
7. conducting local monitoring of the provider according to the requirements as set forth in this policy.

**LOCAL MONITORING**

1. The Managed Care Organization shall develop and implement written policies governing local monitoring of Chatham Trades and other Category A and B providers. The written policies shall address:
   1. the frequency and extent of local monitoring based on the following:
      1. number and severity of level II or level III incidents reported by Chatham Trades;
      2. Chatham Trades' response to the incidents;
      3. Chatham Trades’ compliance with the reporting requirements as set forth in this policy;
      4. the number and types of complaints received concerning Chatham Trades;
      5. Chatham Trades’ response to the complaints;
      6. the conclusions reached from investigation of the complaints;
      7. the results of reviews conducted by the Division of Health Service Regulation, the Division of Mental Health, Developmental Disabilities and Substance Abuse Services or the Division of Social Services;
      8. compliance with the requirements of the provision of public services;
      9. Chatham Trades’ quality improvement activities as required pursuant to North Carolina Administrative Code, and trends in improvement;
      10. compliance with the contract or Memorandum of Agreement with the Managed Care Organization;
      11. the addition of a new service; and
      12. accreditation by an accreditation agency approved by the Secretary of Health and Human Services such as the Council on Accreditation (COA), the Council on Quality and Leadership (CQL), the Commission on Accreditation of Rehabilitation Facilities (CARF), or The Joint Commission;
   2. The quality of the mental health, developmental disabilities and substance abuse services of Chatham Trades;
   3. The MCO shall defer to the Division of Health Service Regulation in the monitoring of any component of services provided which is an element of rule that is monitored by the Division of Health Service Regulation. For Chatham Trades, the MCO shall monitor all components of services provided which are not found in Rule; and
   4. If an investigation discloses issues that could affect either Chatham Trades’ licensure or suspension according to North Carolina Administrative Code, the Managed Care Organization shall refer Chatham Trades to either the Division of Health Service Regulation or the Division of Mental Health, Developmental Disabilities and Substance Abuse Services pursuant to North Carolina Administration Code and this policy.
2. When local monitoring occurs, the Managed Care Organization shall communicate the results to Chatham Trades within 15 calendar days of completion. The communication of the results shall constitute a local monitoring report that includes:
   1. identification of each service monitored;
   2. identification of any issues requiring correction; and
   3. the timelines for implementing the corrections which shall not exceed 60 days from the date Chatham Trades receives the local monitoring report.
3. A Managed Care Organization that conducts the local monitoring of a provider serving another Managed Care Organization's consumer shall provide a copy of the local monitoring report to the consumer's home Managed Care Organization within 15 calendar days of completion.

**MANAGED CARE ORGANIZATION REPORTING REQUIREMENTS**

1. As part of its quality improvement process as set forth in North Carolina Administrative Code, the MCO shall review, not less than quarterly, patterns and trends in:
   1. level I, level II and level III incidents;
   2. complaints concerning the provision of public services; and
   3. local monitoring results gathered pursuant to requirements established in North Carolina Administrative Code.
2. The MCO shall provide reports based on the review specified in this policy. The reports shall be submitted via electronic means to the Division of Mental Health, Developmental Disabilities and Substance Abuse Services quarterly on forms provided by the Secretary of Health and Human Service. Copies of the reports shall be provided to the MCO's area board, local Consumer and Family Advisory Committee and the local Consumer Rights Committee.
3. The reports shall include the following:
   1. summary numbers of the types of complaints, incidents and results of local monitoring;
   2. trends identified through analyses of complaints, incidents and local monitoring; and
   3. use of the analyses for improvement of the service system and planning of future monitoring activities.

**REQUIREMENTS CONCERNING THE NEED FOR PROTECTIVE SERVICES**

1. If the circumstances identified surrounding an incident, complaint or local monitoring give reasonable cause to believe that a disabled adult receiving services from Chatham Trades may be abused, neglected or exploited and in need of protective services, the Managed Care Organization shall ensure the procedures outlined in G.S. 108A, Article 6, are initiated.
2. If the circumstances surrounding an incident, complaint or local monitoring reveal that a child or adolescent may be abused, neglected or exploited and in need of protective services, the Managed Care Organization shall ensure the procedures outlined in G.S. 7B, Article 3, are initiated.

**DOCUMENTATION OF SUSPECTED/OBSERVED ABUSE/NEGLECT**

1. Whenever abuse/neglect of an individual is observed or suspected, facts relative to the abuse/neglect or suspected abuse/neglect shall be documented in the service record, including reports made by the individual and actions taken by staff.
2. Opinions relative to the abuse/neglect or alleged abuse/neglect shall not be documented in incident reports or in the individual’s record.
3. Per G.S. § 7B-301, any person or institution has the duty to report abuse, neglect, dependency, or death due to maltreatment of any juvenile to the Director of the Department of Social Services in the county where the juvenile resides or is found.
4. Per G.S. § 108A-102, any person having reasonable cause to believe that a disabled adult is in need of protective services shall report such information to the Director of the Department of Social Services in the county in which the person resides or is present.
5. Per 10A NCAC 27G .0604, Chatham Trades shall submit an incident report to the host MCO, Home MCO, and DMH/DD/SAS [as appropriate for the level of incident] whenever there is an allegation of abuse, neglect, or exploitation of an individual.