

QUALITY LIFE CONCEPTS

POLICY/PROCEDURES: Incident Management Trend Analysis/High Risk Reviews A 42

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Incident Management Trend Analysis/High Risk Reviews

Scope: This procedure applies to all staff and affiliates of Quality Life Concepts (QLC).

POLICY:

To insure the health and safety of every client served by QLC, it is imperative that trend analysis and high risk reviews occur in our incident management system. This protocol creates a system for conducting reviews, implementing corrective actions to prevent recurrence of similar incidents and promotes data collection and trend analysis. This allows QLC the ability to develop support for changes in Personal Support Plans (PSP) and Individualized Family Service Plans (IFSP) to prevent more serious incidents.

PROCEDURES:

Trend Analysis

QLC reviews monthly the Incident Management Trend Summary or Analysis of Critical and Reportable Incidents, and documentation of actions taken, no later than ten (10) working days after the last day of the month. This report includes, but not limited to the following:

- a. Total number of incidents;
- b. Types of incidents;
- c. Types of incidents by client name;
- d. Causes of Incidents;
- e. Incidents by total number of injuries;
- f. Severity of injuries;
- g. Location where injuries and other incidents occur (as needed);
- h. Shifts, if applicable, on which injuries and other incidents occur (as needed);
- i. Specific employees involved in the incident (as needed);
- j. Specific clients involved in the incident (as needed); and
- k. Other trends deemed as being appropriate, based on the needs of clients and the mission of the QLC.

The Incident Management Committee is responsible for submitting the Incident Management Trend Summary of Critical and Reportable Incidents, along with completing an annual report relating to their review and actions taken, to the following:

- a. Developmental Disabilities Program's (DDP) Quality Improvement Specialist (QIS) (monthly report).

High Risk Review

High Risk Reviews are scheduled as needed. On a monthly basis, the Critical Incident Coordinator (CIC) will determine if any High Risk Reviews are needed. However, any person that feels that an individual could benefit from a High Risk Review could certainly request one through the CIC. The CIC will notify all persons involved with a client of the need for a High Risk Review and the date the review is scheduled.

The High Risk Committee will be comprised of the following individuals:

- a. The client's Case Manager;
- b. The QIS assigned to the individual;
- c. The QLC staff assigned to the individual(s); and
- d. The supervisor of the QLC staff assigned to the individual.

The purpose of the review is to assess the need of a "high risk review" of clients whose history of incidents indicates the need for a more thorough evaluation. The reviews, when they occur should discuss:

- a. The circumstances of incidents involving the client (as well as other available pertinent information);
- b. Possible corrective/preventive actions to ensure better protection for the client, and
- c. Whether the PSP Team/Circle of Support or IFSP Team should meet to consider revising the PSP or the IFSP.

A High Risk Review for any client who meets one (1) or more of the criteria listed below is required within 10 working days (the Incident Management Committee may also determine that more frequent high risk reviews are indicated):

- a. Three (3) or more critical incidents during the preceding month or five (5) or more critical incidents during the preceding three (3) months;
- b. Two (2) or more critical incidents involving serious or severe injury during the preceding twelve (12) months;
- c. Two (2) or more substantiated allegations of abuse, neglect, mistreatment, or exploitation during the preceding twelve (12) months;
- d. A lengthy convalescence or permanent impairment due to a serious or severe injury;
- e. A serious or severe injury due to substantiated allegations of staff abuse, neglect, mistreatment, or exploitation; or
- f. A pattern or trend of reportable incidents involving a client over a three (3) month period that requires a more thorough review and assessment of the client's needs.
- g. Any incident that results in emergency hospitalization of the client requires that a high risk review be conducted at the next scheduled weekly meeting of the Incident Management Committee.

The Committee also has the discretion to recommend a High Risk Review for a person who does not meet the minimum criteria as defined above.

There may be exceptional circumstances where the "numbers" for a High Risk Review are met, but the Committee and Case Manager determine that the high risk review process is not the best approach for addressing the needs of the client (e.g., numerous status seizures, an individual incident pattern already identified and addressed with a

formal plan, client has a terminal illness and is making frequent trips to the hospital, etc.). In such circumstances, a request for exceptions to the high-risk review requirement may be submitted in writing to the Regional QIS at DDP. Any exceptions will be approved in writing.

The Case Manager must be notified of any scheduled high risk reviews of clients. The Case Manager is expected to participate in this meeting.

In collaboration with the Case Manager, the Committee should assure that relevant information related to the client including the PSP or IFSP, prior incident history and new developments in daily life are available for high-risk review meetings.

Enforcement

Failure by agency personnel to follow this procedure may result in disciplinary action, up to and including termination of employment.

RELATED DOCUMENTS

1. Incident Management Policy and DDP Incident Management System
<http://www.dphhs.mt.gov/dsd/ddp/incidentmanagmentpolicy012210.pdf>
2. Policy A 45 Reporting Timelines