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INTRODUCTION

It is vitally important to the prudent management of agency affairs that we properly report, investigate, analyze and document any incident which raises a potential risk management or liability issue. Not only does this allow the agency to react to and deal with incidents in an appropriate fashion, but it also provides the proactive function of allowing us to study patterns, trends and causation with an eye toward reviewing or improving our processes and practices. The procedures that follow implement that function. By following them we not only minimize liability risks, but also assure ourselves that we are following best practice in providing our service.

INCIDENT REPORTING

What needs to be reported?

Any incident, condition or occurrence in the course of agency operation which appears to place an FRI staff or client at risk or to have resulted in injury to either must be reported. Any other matter which creates a possibility that Family Resources may need to deal with a claim of legal responsibility other than routine contract performance (such as paying the bills) should be reported. To try to put some meat to this general definition a report must be made of any of the following events:

- Any injury to any employee, no matter how minor, which occurs while the employee is at work or doing work away from the premises.
- Any injury to any person, no matter how minor, in or on a Family Resources site, or which occurs while in contact with a Family Resources employee or activity.
- Any automobile accident, no matter how minor, involving a Family Resources owned vehicle or any vehicle while being operated on Family Resources business.
- Any damage to Family Resources property other than ordinary wear and tear.



- Any claim by any person that they have received personal injury, emotional distress, or property damage as the result of any action by Family Resources or any Family Resources representative.
- Any claim by any person that Family Resources has not complied with the terms of a contract, or owes more money for an otherwise routine business transaction than we believe is owed.
- Any claim or finding by any person that Family Resources is out of compliance with a legal, regulatory or certification standard of any kind, or that a Family Resources employee has failed to act in a professionally appropriate manner.
- Any matter involving the making of a mandatory child or dependent abuse report.
- Any claim, request, or demand for information or records which we believe is questionable.
- Any matter that involves the potential for making a claim under our property or liability insurance policies, or where we may be required to make a claim against some one else's policy.
- Any matter involving a claim by Family Resources that we are owed money or an obligation of performance that is not being recognized by the other party.
- Any situation encountered in the course of work in which a Family Resources employee feels threatened or unsafe.

Finally, remember that this is a list of examples only. Resolve all doubt by making a report.

What form should an incident report take?

Family Resources provides pre printed, pre numbered report forms which must be used for all incidents. Those forms contain clear instructions for their use.

Where and when should the report be sent?

In accordance with the instructions, the incident report is to be completed as soon as the incident is discovered and color coded copies sent to Continuous Quality Improvement, the Nursing Office at Wittenmyer Youth Center and to the applicable supervisor.

Why?

The earliest possible receipt of information about any incident allows the appropriate program officials to take whatever action they deem necessary under the circumstances. The Nursing Department is enabled to analyze the medical significance of any incident and provide its response. (Notice that we allow the nurses to determine whether an incident is medically significant, since they get a copy of all reports, whether injury related or not!) Early notice also allows the agency to make sure proper notices of claim are made to protect our rights to insurance coverage, to facilitate the taking of any other legally important steps to protect our rights. Most importantly, early notice is essential to the effective implementation of our incident assessment procedures.

What happens after the report is filed?

Three determinations are to be made immediately when a report is received, by everyone in the chain. The first is whether any immediate action not already taken is necessary. The second is whether anybody in the agency not already notified needs to be made aware of the situation. The third is whether the situation is what may be described as “critical incident” invoking the incident assessment process described herein. After the initial concerns are resolved, the statistical part of the reporting system kicks in. Information from the incident report and supplemental reports, which are also sent to CQI will be assembled and periodically summarized. These reports will be compiled, collated, and reviewed with management and the CQI committee to determine whether any proactive measures need to be taken.

What if there has been an “incident” or a “claim”, but I don’t think there is a problem?

Every incident or claim needs to be reported whether you believe there is a problem or ultimate liability or not. Even in cases where there is no merit to a claim, certain steps need to be taken right away. Delay or neglect in reporting can have disastrous consequences.

How do I report additional information relevant to an incident?

Additional or follow up information is reported in the Incident Report Supplement form. Like the original report, this is a form provided by Family Resources with clear instructions. Use this form and follow the instructions.

INCIDENT DATA AND QI REVIEW

Most ‘incidents’ are resolved quickly without major consequence. Almost by definition, however, each occurrence carries with it the potential to be more serious. A ‘sprain’ occurring from a restraint or slip and fall could easily have been a torn ligament or worse, for example. For that reason, it is a very important element of our risk management and quality improvement efforts that we accumulate and evaluate in a meaningful way the aggregate data we can obtain from these and other reports. This section describes our processes for accomplishing that task.

QI DATA ANALYSIS

The first step in the process is to accumulate the raw data and transform it into a meaningful analysis. The data is mined from multiple sources identified as reliable indicators of the presence of potential issues. Sources include:

- ✓ Incident Reports as identified in the previous section.
- ✓ Client complaints or grievances.
- ✓ Employee Grievances.
- ✓ Assessment reports.
- ✓ Case record QI review.

- ✓ Licensing/inspection reports.

QI analyzes this data, breaks it down into meaningful categories, tabulates the information and creates reports which cross reference the results by several factors. These reports are then presented for analysis and review as described in the following sections:

PROGRAM REPORTS

Monthly and quarterly incident report summaries and trend analyses developed by the QI department and provided to each area director and program supervisor as appropriate. It is expected that this data will be a part of regular QA reviews by each program and division. The goal of these reviews is to identify trends which will assist development of improvement plan in areas such as program design, interventions practices, and physical environment and facilities.

QUARTERLY REVIEW

Once each quarter the QI report generated as described in the previous section is presented to and discussed and analyzed further by the Service Quality and Effectiveness Team. The SQE Team is composed as follows:

- ✓ Agency Vice Presidents
- ✓ Program Directors or Project Managers from each major service area.
- ✓ Selected line staff from each area.
- ✓ Corporate Counsel, HR Director and QI Director.

The goals of this presentation and discussion include:

- ✓ Providing direct feedback to program areas.
- ✓ Identifying trends.
- ✓ Identifying clusters or areas of concern.
- ✓ Assuring multi disciplinary exchange in the analysis of data and the development of corrective action when needed.