



PRACTICE AND PROCEDURE MANUAL
Subject: Critical Incident Assessment, Program
Level Reviews; Civil Service Utilization Reports;
Crisis Communications

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INTRODUCTION

There are certain types of incidents which require more attention than what is outlined in the chapter of this manual concerning ‘incident reporting’. These are events that due to their nature are sufficiently serious that we need to take extra steps to make sure we have found and reported all the relevant facts and made an independent assessment of what we have found for the purpose of determining whether or not there are any improvement actions we can or should take in light of what we have learned. Each of these incidents also carries with it the responsibility to identify who needs to be made aware of the occurrence and how they are to be notified as well the need to prepare for and respond to public enquiry. We identify for this purpose three categories of incidents and the assessment activities and reports required: Critical Incidents; Program Level Reviews, and Civil Service Utilization Reports. The procedures required for each are set forth in this chapter.

CRITICAL INCIDENTS:

If our incident reporting policy is followed, many incidents of a relatively minor nature will be reported. An initial review by the staff receiving notice through the reporting procedure of incidents will indicate that other than routine follow up no further action needs to be taken. Incidents of a more serious nature, however, are treated differently. These are “critical incidents” and any critical incident must be subjected to an assessment in accordance with this procedure.

Any of the following are automatically deemed “critical”:

1. Any claim of harassment, retaliation, hostile work environment, or discrimination by an employee or client of Family Resources.
2. Any incident of injury or claim of injury to a client resulting from any action or inaction by a Family Resources employee.
3. A repeat incident of founded abuse regarding a child in our care or an identified child receiving services through the Family Safety, Risk and Permanency Contract.
4. Any incident involving the possibility of reckless or willful disregard of client welfare, client rights, regulatory compliance or professional standards.
5. Any incident or claim of employee theft or dishonesty.
6. Any employee injury which involves a period of disability (unable to work) more than three days.
7. Any other matter coming to the attention of a program director in the affected area, the Director of CQI, corporation counsel or an officer in any manner which, in their judgment, should receive an independent assessment.

CRITICAL INCIDENT RESPONSE PROCESS

Our response to a critical incident, once a situation is identified as such, needs to meet the following benchmarks:

- ✓ The immediate response must obtain sufficient information concerning what actually happened as quickly as necessary to assure that immediate action can be taken to ensure the welfare and safety of those involved, and to satisfy internal and external reporting requirements.
- ✓ Our response must include an accurate and in depth gathering of relevant facts concerning the situation. This will allow a review to be completed which assures a full and independent assessment of the situation and will identify actions and/or improvement activities derived from 'lessons learned'.
- ✓ Our findings, conclusions, and improvement steps (if needed) with assigned responsibility for follow up are fully documented.

To assure our response meets these benchmarks, the following procedures have been established:

IMMEDIATE ACTION

As soon as a situation is identified as having the potential to meet the definition of a critical incident the following actions should be taken:

- ✓ **Non Supervisory Staff:** If the individual who first recognizes the situation as a critical incident is not supervisory staff, they should immediately make personal notification to their supervisor, or if unable to contact their supervisor to the first supervisor, Director or Vice President they are able to make contact with.
- ✓ **Supervisory Staff:** Supervisory staff who become aware of the situation must take the following immediate actions:
 - a. Assure safety of all involved by taking direct action if within their authority or by contacting the first available person within the chain of authority with their concerns.

- b. Contact the first available Program Director or above and advise of the situation as known and any immediate actions already taken.
- ✓ **Program Director:** After assuring that any immediate action necessary to assure safety of all involved has been taken, the responsible Program Director will:
 - a. Make inquiry to ascertain the accuracy of the report and severity of the incident to the extent this can be done without jeopardizing the integrity of any follow up investigation (assuming safety considerations have been addressed).
 - b. Assure that any legally mandated external notifications (such as mandatory reporter) have been made and/or determine the need for other external notifications.
 - c. Provide personal notification of the situation and immediate actions taken to the Vice President with responsibility for their program area. If unable to make personal contact, with that Vice President, will contact the first available Vice President, President/CEO, Corporate Counsel, or CQI Director.
- ✓ **Officer:** The Officer who becomes aware of the situation will take the following immediate actions:
 - d. Assure that immediate action necessary to assure safety of any involved is being taken.
 - e. Direct any appropriate action necessary to ascertain the accuracy of the report and severity of the incident to the extent this can be done without jeopardizing the integrity of any follow up investigation.
 - f. Assure that any legally mandated external notifications (such as mandatory reporter, licensing) have been made.
 - g. Provide notification of the situation and immediate actions taken to all of the following not previously involved: President/CEO, Vice Presidents, Corporate Counsel, HR Director, CQI Director, and Communications Officer.

CRITICAL INCIDENT REVIEW PROCEDURE

Unless and until it is conclusively determined from the immediate investigation that the incident does not in fact meet the definition of a critical incident, the following review procedures are to be followed:

The senior official with responsibility will determine the most appropriate method by which an in depth and accurate finding of facts can be conducted and who will be responsible to complete the review process. The method by which this is accomplished can vary according to the situation and may include the following:

- ✓ **Full Scale Internal Assessment:** In the most intense situations it may be necessary to assign an individual or team from outside the program area to do a complete assessment, including interviews of all relevant witnesses, under the direction of the appropriate officer.
- ✓ **Program Level Review:** In many situations it may be determined that a Program Level Review as described in subsequent sections of this procedure is sufficient for an accurate analysis.
- ✓ **Administrative Review:** In some situation it may be sufficient to gather the interested individuals for a discussion and analysis of the situation.

The exact method followed must assure the timely response of the review. Final determination of the method to be adopted in the event of lack of consensus rests with the CEO.

CRITICAL INCIDENT REVIEW AND DOCUMENTATION:

Once the facts are gathered the process of reviewing and documenting the incident will occur as follows:

Preliminary Report:

Whatever method is adopted in the review stage will result in a report that will describe the findings, preliminary conclusions and recommendations. The report should follow the format of the Critical Incident Assessment Form, Program Level Review Form or Civil Service Utilization Form. This report will be circulated to involved supervisory staff, President/CEO, Vice Presidents, Corporate Counsel, HR Director, CQI Director and Communications Officer. As soon thereafter as practicable, an administrative review will be held.

Administrative Review:

The senior official overseeing the review is responsible for scheduling the administrative review meeting at the earliest opportunity. This process will include participation by the senior official and all other relevant agency personnel. An invitation to attend all administrative reviews is required to be offered to the President/CEO, Vice President, Corporate Counsel, Director of CQI, Communications Officer, and HR Director. Those individuals are expected to use their discretion to determine whether they believe their participation is required for a particular review meeting, but under no circumstances should their availability or lack thereof unduly delay the process.

Red Flag Meeting/Improvement Plan:

It is important to recognize that a ‘critical incident’ by definition represents a trauma to those involved and to the organization itself. The Sanctuary Model of implementation of trauma informed care prescribes a “Red Flag Meeting” as a tool to respond to those situations. The purpose of the red Flag Meeting is to draw upon the collective wisdom, knowledge and expertise of the entire team to help us and the organization to get ‘unstuck’ and to move forward. One of the end results of this process will necessarily be an improvement plan identifying steps which reasonably can be taken to reduce opportunities for repeat and specifying team responsibilities for implementation. This plan will be included in the final assessment report.

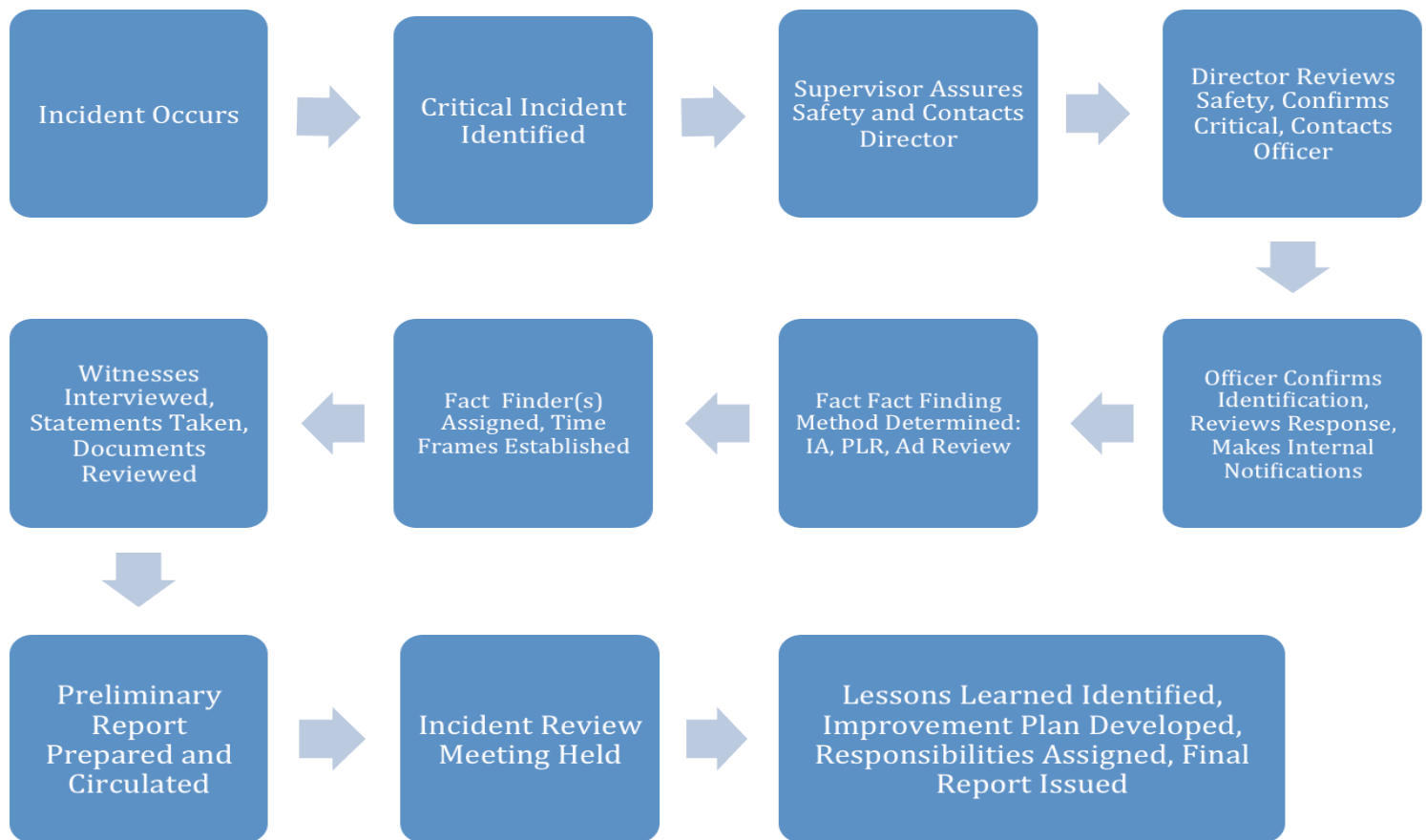
Final Report:

Following the administrative review process, a final report will be issued updating the preliminary report to include any final findings, conclusions, recommendations, improvement plans, and assigned responsibility for follow up.

Relationship of Critical Incidents to Personnel Actions:

On some occasions this assessment process will involve matters in which staff may not have acted to the level of performance expected of Family Resources employees. Investigation of those actions for the purpose of determining appropriate HR response is a parallel process which should be, to the extent possible, conducted in unison with the critical incident review.

Incident Review Process Flow Chart:



PROGRAM LEVEL REVIEW

A Program Level Review process may be initiated when it is really important to find out for certain what actually happened in order to determine what to do. Program Level Reviews may become Critical Incident Assessments as facts become known and frequently the Program Level Review Report provides the basis for the Critical Incident finding and assessment.

PROGRAM LEVEL REVIEW PROCESS

The difference between a Critical Incident Assessment and a Program Level Review is that it may be accomplished within the program area where the incident occurred. Most commonly, it is initiated at the direction of the Director. While less formal than a critical incident assessment, the program level review will need to meet the following benchmarks:

- ⇒ The agency Vice Presidents, CQI Director, Corporate Counsel, and Communications Officer must be notified of the review.
- ⇒ All relevant witnesses and informational sources must be consulted and identified in the report.
- ⇒ Applicable time expectations for completion must be set at the beginning of the process.
- ⇒ The resulting report must be comprehensive with appropriate and needed recommendations for corrective action.
- ⇒ The report will be subjected to administrative review with representation from all necessary parties.
- ⇒ The final report with recommendations and corrective actions must be provided to Corporate Counsel and CQI.

CIVIL SERVICE UTILIZATION REPORT

It is the nature of our work that we will encounter situations in which assistance from emergency responders—such as police, fire or ambulance—is needed. Any such episode almost automatically carries with it elements of risk. Clearly, if there were no risk, emergency responders would not be required. Because of that, it is important to have a process by which each such incident is documented in a report and subjected to appropriate review in a timely fashion. The Civil Service Utilization Report process is as follows:

- ⇒ A Civil Service Utilization Report is to be completed using the proper form whenever police, fire, or ambulance are summoned in a non routine response to a Family Resources location or to another location for the purposes of assisting, or as a result of a call from, a Family Resources employee in the course of their duties.
- ⇒ This report is in addition to any incident report required by the nature of the event.

- ⇒ It is the responsibility of the supervisor and director of the involved area to assure that the report is done.
- ⇒ The initial report must be completed within two business days of the incident, inclusive of the day the incident occurred.
- ⇒ When completed, copies of the report must be submitted to the Vice President with operational responsibility for the involved program, the Quality Improvement Department, Corporate Counsel, and Communications Officer who may recommend further follow up or review.

CONTRACT DEFINED CRITICAL INCIDENTS AND RESPONSIBILITIES

Many of our funding contacts contain provisions relating to occurrences identified also as “critical incidents”. Those contracts individually define what constitutes a critical incident for the purposes of the contract and sets forth responsibilities for response. Those definitions do not necessarily align directly with this procedure and this overlap in terminology contains the potential for misunderstanding. The following clarifying rules are intended to prevent that potential:

- ✓ Every program operating under a contract or regulations which contains any provision concerning reporting and/or response to an event defined therein as a ‘critical incident’ shall be intimately familiar with and follow such provision.
- ✓ In the event the occurrence which requires the contract defined response also meets the definition of a ‘critical incident’ contained in this procedure the process set forth herein will be followed in addition to those required by such contract or regulation and compliance with the those requirements documented in any resulting report.
- ✓ In the event the occurrence which requires the contract defined response does not meet the definition of a ‘critical incident’ contained in this procedure, the program officers responsible