Critical Incident Reporting



What Is A Critical Incident?

It is an actual, alleged or suspected event that <u>creates/indicates a risk</u> to the person's well-being (health & welfare).

A risk could be an event of harm by Abuse, Neglect, Exploitation.

You may receive notice of an event through direct conversations and/or observations with the participant, family, representative or a Home Health care service provider.

Take Immediate Action!

You are to act immediately to ensure the health and welfare of the participant!

The first action should be is to attempt to ensure the participant is no longer in harm and then work towards obtaining necessary details of Who, What, When, Where and Why.

You are to contact their legal Representative (if applicable) and the Supports Coordinator (SC) or Transitional Navigator (TN) to inform them of the risk and for a plan of action to be implemented.

A Provider Incident Report is to be filled out detailing the reported issue and sent to VAAA's SC or TN in the appropriate time based on reported risk.

Please Note!

A person is not considered abused, neglected, or in need of emergency or protective services for the sole reason that the person is receiving or relying upon treatment by spiritual means, practices of a recognized church or religious denomination.

By contacting APS or local authorities regarding risks you are going against their wishes, what they practice and is a form of discrimination or bias.

By forcing treatment on that individual and because it goes against their practices, they will view themselves as being religiously or spiritually disobedient. You could possibly lose any respect or rapport with that participant, making working with that individual difficult.

What Are The Types Of Critical Incidents?

- Critical No Show
- Eviction
- Exploitation
- Illegal Activity in the Home
- Medication error (resulting in ER or Hospital treatment)
- Missing person/Elopement
- Neglect
- Physical Abuse

- Sexual Abuse
- Suicide/Suicide attempts/Selfharm
- Theft
- Unexpected/Unexplained Death
- Use of restraints/restrictive Interventions/seclusions
- Verbal Abuse
- Worker Drugs/Alcohol
- Other (example is a fire, drive by shooting or car accident)

Incidents That Require Additional Reporting

Adult protective Services (APS):

- Abuse
 - Physical
 - Sexual
 - Verbal
- Exploitation
- Neglect

Local Law enforcement Agencies (Police, Elder Abuse Task force):

- Illegal Activity in the home.
- Unexpected or unexplained death.
- Medication error (resulting in Death)
- Theft
- Missing Person/Elopement

Licensing and Regulatory Affairs (LARA) (regarding AFC/HFA staff, LPN or RN while under their care):

- Abuse (physical, sexual, verbal)
- Critical No Show
- Illegal Activity in the home
- Medication errors
- Missing person/elopement
- Neglect
- Theft
- Unexpected/unexplained death
- Use of Restraints/restrictive devices
- Worker drug/alcohol use.

https://www.michigan.gov/lara/i-needto/make-a-complaint-about-a-licensedprofessional-or-business

Why Is Additional Reporting Needed?

We need to make additional reporting because the SCs and TNs do not have the legal authority to implement certain plans to ensure the risk reduction is successful.

Also, by making these additional reports it is on a legal record and can provide a history is risks and who was involved. The more history someone has, the more at risk they are.

- **APS** can provide an investigation and work with local law enforcement if necessary to stop the risk of harm.
- Local law enforcement will also investigate but will ensure no criminal laws were broken and if so, will work with the legal system to for prosecution.
- LARA reporting is notifying Michigan Department of Health and Human Services (MDHHS) regarding specific occupations or home care settings that engage in risky behavior. MDHHS will perform an investigation and may put the home care setting or professional under watch or may even revoke a license depending on the severity of harm found.

Critical Incident Reporting Regarding A Fall/Injury

Why also report on falls or injuries?

The following specified incidents could have resulted in harm related to a Fall or injury.

- Critical Provider no show: A fall/injury resulting from lack of critical care need due to their dependence on others.
- <u>Illegal Activity in the home:</u> Did the participant use/consume drugs that resulted in a negative event (fall/injury).
- <u>Medication management/administration: They given the wrong medication/no medication/too much of the medication resulting in a fall/injury and resulted in ER or Hospitalization.</u>
- Neglect: Lack of supervision due to participant's inability to respond to a harmful situation, failure to provide medical care or access to their DME.
- Physical Abuse: Any use of unreasonable force on participant with or without harm (injury).
- Theft: Someone stole their DME or medication resulting in a fall/injury.
- <u>Use of restraints or seclusions:</u> The participant was restrained/restricted and attempted to get out, the application of pressure without guidance that restricted freedom of movement, a chemical restraint causing effects to physical function. All attempts to be unrestrained resulted in a Fall/Injury.
- <u>Worker consuming drugs or alcohol on the job</u>: Did the worker use/consume drugs that resulted in a negative event (fall/injury).

Lastly, sometimes falls or injuries just happen. The SC or TN will still want to know the details of the fall or injury to ensure their Person-Center Plan is working accordingly or requires modifications.

Types Of Abuse

	Meaning	Indicators
Physical Abuse	The use of unreasonable force on a participant with or without apparent harm. Includes unreasonable confinement (physical or chemical restraints, seclusion, and restrictive interventions)	Unexplained cuts, bruises, swelling, burns, fractures, strains, sprains, dislocation. Dental and eye injuries
Sexual Abuse	 Criminal sexual conduct involving an employee, volunteer, or agent of a provider and a recipient. (i) Any sexual contact or sexual penetration involving an employee, volunteer, or agent of a department operated hospital or center, a licensed facility or an adult foster care facility and a recipient. (ii) Any sexual contact or sexual penetration involving an employee, volunteer, or agent of a provider and a recipient for whom the employee, volunteer, or agent provides direct services. 	Pain or itching in genital areas. Bruising or bleeding in genital areas. Sexually transmitted disease. Frequent urinary or yeast infections. Extreme or sudden weight changes. Withdrawal, chronic depression. Sexual behaviors or reference. Seductive or promiscuous behavior. Poor self-esteem, self-devaluation, lack of confidence. Suicide attempts. Hysteria, lack of emotional control
Verbal Abuse	Intimidation or cruel punishment that causes or is likely to cause mental anguish or emotional harm	Other will name-call, insult, criticizing, degrading, threaten, scream/yell, gaslight, manipulate.

If you feel the participant will not be safe if you leave the house because the risk is still present in the home, do not leave! Attempt to contact 911 discreetly and inform the participant of your plans.

Notify the SC or TN of a Critical Incident within 30 calendar days.

Neglect

	Meaning	Physical Indicators	Behavioral Indicators
Neglect	Acts of directives or exclusions by an employee, volunteer, or worker of a provider that result from noncompliance with a standard of care or treatment required by law or rules, policies, guidelines, written directives, procedures, or individual plans of service that cause or contribute to non-serious physical harm or emotional harm, death, or sexual abuse of, serious physical harm to a recipient, or the intentional, knowing or reckless acts of exclusion or deprivation of essential needs (including medication management).	Unattended Medical Needs Lack of Supervision Regular signs of hunger, inappropriate dressing, poor hygiene Distended stomach, emaciated Significant weight change	Regularly displays fatigue, listlessness, falls asleep during abnormal times Steals. Hoards or begs for food. Reports no caretaker is at home.

If you feel the participant will not be safe if you leave the house because the risk is still present in the home, do not leave! Attempt to contact 911 discreetly and inform the participant of your plans. Notify the SC or TN of a Critical Incident within 30 calendar days.

Exploitation

	Meaning	Examples
Financial or Material	The improper, illegal or unauthorized use of an individual's funds, assets, property, power of attorney, guardianship or conservatorship for the profit or advantage of anyone besides the individual.	Cashing someone's checks without permission, forging someone's signature, misusing someone's money or possessions, and coercing or deceiving someone into signing any document.
Labor or activity	Causing or requiring an individual to engage in work or any activity which is improper, illegal, demeaning, or against the reasonable and rational wishes of the individual.	Forced chores or activities which are not a part of an individual's written plan of care, or which are not prescribed or authorized by the individual's physician or service authorizations.

Notify the local law enforcement agency regarding the risk/harm. Notify the SC or TN of a Critical Incident within 30 calendar days.

What Is A Critical No Show?

Instances when a provider is scheduled to be at a participant's home but does not come and the back-up service plan is either not put into effect or fails to get an individual to the participant home in a timely manner.

This becomes a critical incident when the participant is bed bound or in critical need and is dependent on others.

 Service Need Level of 1A, 1B or 1C (Cannot be left alone) and has no successful backup plan.

Let the SC or TN know right away if you see issues or discrepancies with the participants Back up plan.

Evictions

This is an involuntary discharge from the home (rental, AFC, HFA). Notice can come from the participant, family, representative or provider staff regarding an informal notice or a formal notice (which starts the eviction process).

An informal notice, may just be presented as a "heads up" regarding issues. However, there are times where the eviction can not be prevented due to lack of timely notice.

Let the SC or TN know if any informal or formal notices are received or presented to the participant to ensure that the SC or TN can work on preventable measures (Behavior or environmental modifications) or locate alternative housing if other interventions are unsuccessful.

Notify the SC or TN of a Critical Incident within 30 calendar days.

Moving is a stressful process for everyone. Let's work together to ensure issues can be resolved before an eviction is processed.

Use Of Restraints/Restrictive devices

	Meaning	Examples
Restraints	'Physical restraint' has been defined as any measure aimed at controlling a patient's physical movement that cannot be easily removed by the patient him/herself.	Bed Rails, Belts, vests, jackets, mitts for hands, fixed tables or straitjackets.
Restrictive Devices	Devices that limits a person's normal freedom or movement.	Door nob lock, node lock, pad locks.

Did you know that Michigan does not allow the use of restraints by paid providers?

As a provider, please do not use restraints/restrictive devices, and if used please notify the SC or TN to ensure alternative methods can be utilized.

The use of these devices puts unneeded stress on the individual and may result in behavioral issues or injury.

Medication Error

	Meaning	Example
Medication Error	Any preventable event that may cause or lead to inappropriate medication use that caused participant harm on the part of a health care professional, family member, direct care worker, informal supports, or the individual.	Giving or taking the wrong medication, wrong dosage, or missed dosage.

Notify the SC or TN of a Critical Incident within 30 calendar days.

However, if a death or injury requiring emergency treatment or hospitalization is the result of a medication error, let the SC or TN know within 2 business days.

*There is a difference between a medication error and the individual's adherence to their prescribed medication regimen. Individuals who make an informed choice to not be 100 percent adherent to their prescribed medication regimen are not experiencing a medication error and should not be included as a critical incident.

Suicide/Suicide Attempts/Self Harm

	Warning Signs
Suicide - death occurs Suicide attempts - suicide was attempted but no death occurred	Talking: about wanting to die, great guilt or shame, being a burden to others. Feeling: Empty, hopeless, trapped, or having no reason to live. Extremely sad, more anxious, agitated, or full of rage. Unbearable emotional or physical pain. Changing Behavior: Making a plan or researching ways to die. Withdrawing from friends, saying goodbye, giving away important items, or making a will. Taking dangerous risks. Displaying extreme mood swings. Eating or sleeping more or less. Using Drugs or alcohol more often
Self-harm - Participant intentionally harms self. It is a harmful way to cope with emotional pain, sadness, anger and stress.	Scars, often in patterns. Fresh cuts, scratches, bruising, bite marks or other wounds. Excessive rubbing of an areas to create a burn. Keeping sharp objects on hand. Wearing long sleeve or long pants, even in hot weather. Frequent reports of accidental injury.

If a participant is actively displaying these warning signs, do not leave the home until you know they are no longer actively at risk (there means to harm are no longer available and they no longer wish to do harm)! Talk to them about your concerns and ask if you can provide them with mental health assistance. Call their PCP and SC or TN to notify of issue. Call 911 if risk is still immediate and inform the participant you are doing so. Notify the SC or TN of a Critical Incident within 30 calendar days.

Missing Person/Elopement

	Meaning
Missing person/Elopement	A participant is missing/disappeared or has wandered away and can't be confirmed as to their location and condition is unknown.

If you were notified that this occurred under someone else's watch or if a participant when missing under your watch it must be reported to the SC or TN.

Steps will need to be developed to ensure this does not occur again. Be mindful that the steps do not include use of restraints or restrictive devices.

Worker Drug/Alcohol Use

	Meaning
Worker Drug/Alcohol use	Use of any drugs or alcohol that would affect the abilities of the worker to do his or her job.

The use of any drugs or alcohol use is prohibited while on the job!

Notify the SC or TN of any use noted or observed use. If the actions are involving the SC or the TN, then the immediate supervisor is to be notified.

Theft

	Meaning
Theft	A person intentionally and fraudulently takes personal property of another without permission or consent and with the intent to convert it to the taker's use (including potential sale).

Notify the SC or TN of any theft noted or observed.

Consider timely notification to the SC or TN based on what was taken. If theft occurred involving medications or devices that promote and/or assist the participant's daily well-being than more immediate action should be taken.

If the actions are involving the SC or the TN, then the immediate supervisor is to be notified.

Illegal Activity In The Home

	Meaning
Illegal Activity in the Home	Theses are actions (Organized crime, or illicit drug use) involving violations of the laws of the state or the United States that puts the participant or the workers coming into the home at risk.

Notify the SC or TN of any illegal Activity in the home noted or observed. If the home activities are preventing staff from coming into the home to provide care, it is recommended that more immediate notification occurs.

Unexpected/Unexplained Death

	Meaning
Unexpected/unexplained Death	Death that which does not occur as a natural outcome to a chronic condition (e.g., terminal illness) or old age.

Notify the SC or TN upon notice or observation of death. If the actions resulted from Home Care staff, LPN or RN then immediate notification to the local law enforcement agency and also within 2 business day to the SC or TN.

Responsibilities

You are also expected as Mandated reports to make an official Abuse, Neglect or Exploitation report regarding information received and confirmed during an investigation.

Who are Mandated Reporters?

- Master and Bachelor Social Workers
- Social Service Technicians
- Nurses
- Employees of an organization or entity that, as a result of federal funding statues, regulations, or contracts.

Report suspected abuse, neglect or exploitation through the Department of Health and Human services at (855)-444-3911.

Take Aways

Most important ...

- Report Incident to VAAA in 2 business days (death) or 30 days of all other Incidents.
- Report to necessary Organizations (APS/CPS, Police, LARA), if applicable.
- Prevention measures: Ensure you are following the Person-Centered Service plan and providing Authorized services accordingly to promote safety and well-being.

Who should you reach out to for Guidance?

Call VAAA at (810) 239-7671 to be directed to the appropriate staff person.

Compliance Officer at (810) 249-6549
fwa@valleyaaa.org
https://valleyareaaging.o
rg/report-suspicious-activity/

- Ask for the Contract Manager regarding contractual obligations.
- Ask for the Supports Coordinator (SC) or Transition Navigator (TN) regarding clarification or follow up of a Critical Incident.
- Ask for the Long-Term Care or Special program supervisor regarding problems with risk resolution from a SC or TN.
- The Compliance Officer regarding exploitation that involves issues with Fraud.