

## **Adverse Incidents Protocol for KDADS Community Service and Programs Licensed and/or Funded Providers**

The adverse incident reporting and review process is designed to facilitate ongoing quality improvement to ensure the health and safety of individuals receiving services by agencies licensed or funded by KDADS. It is intended to provide information to improve policies, procedures, and practices.

Adverse Incidents include potentially serious events or outcomes, as defined:

1. Abuse: Any act or failure to act performed intentionally or recklessly that causes or is likely to cause harm to a participant, including:
  - a. Infliction of physical or mental injury
  - b. Any sexual act with a participant that does not consent or when the other person knows or should know that the participant is incapable of resisting or declining consent to the sexual act due to mental deficiency or disease or due to fear of retribution or hardship
  - c. Unreasonable use of a physical restraint, isolation or medication that harms or is likely to harm the participant
  - d. Unreasonable use of a physical or chemical restraint, medication or isolation as punishment, for convenience, in conflict with a physician's orders or as a substitute for treatment, except where such conduct or physical restraint is in furtherance of the health and safety of the participant or another individual
  - e. A threat or menacing conduct directed toward the participant that results or might reasonably be expected to result in fear or emotional or mental distress to the participant
  - f. Fiduciary abuse
  - g. Omission or deprivation by a caretaker or another person of goods or services which are necessary to avoid physical or mental harm or illness.
2. Death: Cessation of a participant's life
3. Elopement: The unplanned departure from a unit or facility where the participant leaves without prior notification or permission or staff escort.

4. **Emergency Medical Care:** The provision of unplanned medical services to a recipient in an emergency room or emergency department. The unplanned medical care may or may not result in hospitalization.
5. **Exploitation:** Misappropriation of the participant's property or intentionally taking unfair advantage of a participant's physical or financial resources for another individual's personal or financial advantage by the use of undue influence, coercion, harassment, duress, deception, false representation or false pretense by a caretaker or another person.
6. **Fiduciary Abuse:** A situation in which any person who is the caretaker of, or who stands in a position of trust to, a participant, takes, secretes, or appropriates their money or property, to any use or purpose not in the due and lawful execution of such person's trust or benefit.
7. **Law Enforcement Involvement:** Any communication or contact with a public office that is vested by law with the duty to maintain public order, make arrests for crimes and investigate criminal acts, whether that duty extends to all crimes or is limited to specific crimes.
8. **Misuse of Medications:** The incorrect administration or mismanagement of medication, by someone providing a KDADS Community Services and Programs service which results in or could result in serious injury or illness to a participant.
9. **Natural Disaster:** A natural event such as a flood, earthquake, or tornado that causes great damage or loss of life. Approved emergency management protocols are to be followed, documented and reported as required by the policy in the AIR system. A separate AIR report shall be made for all HCBS participants in the area who are impacted by the natural disaster.
10. **Neglect:** The failure or omission by one's self, caretaker or another person with a duty to supply or to provide goods or services which are reasonably necessary to ensure safety and well-being and to avoid physical or mental harm or illness.
11. **Seclusion:** The involuntary confinement of a participant alone in a room or area from which the participant is physically prevented from leaving.
12. **Restraint:** Any bodily force, device/object, or chemical used to substantially limit a person's movement.
13. **Serious Injury:** An unexpected occurrence involving the significant impairment of the physical condition of a participant. Serious injury specifically includes loss of limb or function.

An adverse incident is reported for all instances involving a member that is actively participating in a KDADS CSP paid service Each incident shall be reported using the appropriate

KDADS Adverse Incident Report (A.I.R) web based tool at [www.aging.ks.gov](http://www.aging.ks.gov) within 24 hours of the provider becoming aware of the occurrence of the adverse incident.

All reportable adverse incidents shall be documented and analyzed as part of the provider's quality assurance and improvement program. Incident reports may be reviewed jointly by the KDADS designated quality manager and the MCO designee to determine whether further review or investigation is needed. Reviews or investigations shall be completed following relevant KDADS CSP policies and procedures (note procedures may be slightly different depending on provider type).

For community mental health centers, if it is determined that an investigation is warranted (including those events designated in K.A.R. 30-60-55 as requiring investigation), the incident will be referred to a Peer Review Committee who are designated and are deemed to be peer review officers and/or peer review committees duly constituted by the mental health center under peer review and risk management laws, including, but not limited to K.S.A. 65-4915 et. seq. and 65-4922 through 4927.