

COMFORT LIFE HOME CARE, LLC. CRITICAL INCIDENT MANAGEMENT POLICY AND PROCEDURES.

PURPOSE: This Policy outlines the Comfort Life Home Care, LLC., (hereinafter “Agency”), response and handling of any Critical Incident which may occur at a Participant (hereinafter “Client”) home in accordance with 55 PA Code Chapter 52.17. As each critical incident is unique, the aim of this Policy and this Agency’s Critical Incident Plan is to provide a general framework to be followed by its employees and staff at Client’s location in which a critical incident occurs. Staff must ensure that while compliance with the Policy is expected, the safety of those involved in the incident is paramount. In most instances this Agency will require involvement and support from external emergency agencies to assist with the management of the incident

SCOPE: This Agency defines a critical incident (hereinafter “CI”) as an occurrence of an event that jeopardizes the Clients health or welfare including traumatic events or the threat of such which causes extreme stress, fear or injury including:

1. Death, serious injury or hospitalization of a Client however pre-planned hospitalization visits are not considered critical incidents.
2. Agency and its staff misconduct including deliberate, willful, unlawful or dishonest activities.
3. Abuse, including the infliction of injury, unreasonable confinement, intimidation, punishment or mental anguish of the Client. The Agency considers the following as Abuse:
 - a. Physical abuse,
 - b. Psychological abuse,
 - c. Sexual abuse, and
 - d. Verbal abuse.
4. Abuse – an act or omission that willfully deprives a participant of rights or human dignity, or which may cause or causes actual physical injury or emotional harm to a participant including a critical incident and any of the following:
 - a. Sexual harassment of a Client,
 - b. Sexual contact between a staff member and a Client,
 - c. Using restraints on a Client,
 - d. Financial exploitation of a Client,
 - e. Humiliating a participant,
 - f. Withholding regular scheduled meals from a Client,
 - g. Neglect,
 - h. Exploitation,
 - i. Service Interruption, and
 - j. Medication errors resulting in hospitalization or other medical intervention.
5. This applies to incidents that happen **at any time**, including:
 - a. CI’s that occur during the time a service is being provided,
 - b. CI’s that occur during the time a staff member, or the Agency as a whole when contracted to provide services but fails to do so, and
 - c. CI’s that occur during the time other than when a staff member or the Agency as a whole is providing or is contracted to provide services (of if the staff member or Agency becomes aware of such incidents).

1. CRITICAL INCIDENT COORDINATORS: This Agency has appointed the President and the Patients Service Coordinator (hereinafter “SC”) as CI Investigators and Overseers who will handle CI investigations and mandatory reporting externally and internally. The Agency through its SC and or President shall report AND INVESTIGATE a CI involving a Client to the Department or the SCE, or both, on a form prescribed by the Department.

2. **STEPS TO BE TAKEN DURING A CI:** Agency, staff and employees must do the following should a CI or CI event occur at a Client's home:
 1. The employee should take the appropriate steps and measurements ensuring to safeguard the Client from further harm. This may include calling 911, law enforcement, the fire department or other authorities as an appropriate safeguard for the health and welfare of the Client.
 2. Once the Client and employee are deemed safe,
 3. The employee must contact the Agency's President,
 4. Inform the President of the CI, or CI event,
 5. Follow the President's directions and instructions in the matter,
 6. The President will then contact and notify the Client's family or representative; depending of the type of CI or CI event the President may either do an On-Site or Telephone CI Investigation,
 7. The employee must complete a CI Report Form prior to ending its shift (unless the employee is not able due to medical reasons) in such case the CI Form must be completed within 24 hours of the event,
 8. The President will determine if the CI or CI event is reportable. A Critical Incident" is defined above.
 9. Within 24 hours, the President will ensure the employee that discovered or has firsthand knowledge of the CI will submit a CI Report to the Agency's SC and OLTL. If the incident occurs over the weekend, a written report must be entered the first business day after the incident occurred.
 10. Incidents must be entered into Enterprise Incident management (EIM) if the Client is age 60 or older or through the RA-incident@pa.gov (if the Client is age 60 or older and the incident is being submitted by our Agency).
3. **DOCUMENTATION OF A CI:** All CI Report forms must be documented as specified above and the initial forms should include:
 - a. The employee/Client reporter's information,
 - b. Clients demographics,
 - c. OLTL program information,
 - d. CI Event details and type (*be specific use additional form if needed*),
 - e. Description of the CI or CI event,
 - f. Actions taken to immediately secure the Client's well-being. and
 - g. Ensure CI Form is signed and dated and returned to SC or President.
4. **AGENCY AND STATE'S CRITICAL INCIDENT REPORTING REQUIREMENTS:** All Staff members and this Agency are required to report CI's or CI events. A Critical Incident" is defined above. Within 24 hours, the President will ensure the employee that discovered or has firsthand knowledge of the CI will submit a critical incident report to the Agency's SC and OLTL.
5. **AGENCY'S CI ON-SITE INVESTIGATION PROCESS:** An onsite investigation is conducted by the SC or President for fact finding. The incident facts, sequence of events, interview of witnesses and observation of the Client and/or environment is required. If a Client is hospitalized, SCs are to meet with hospital social workers and the attending physician to ensure hospital staff is aware of the CI to ensure a safe disposition.
6. **AGENCY'S CI TELEPHONE INVESTIGATION PROCESS:** depending of the type of CI the SC or President may conduct a Telephone Investigation to determine or reveals facts that are missing or additional information is required. During a Telephone or On-site Investigation, the SC or President will ensure the Agency's CI steps are followed and all mandatory reporting of CI are completed.

7. CLOSING A CI INVESTIGATION: The Agency's SC or President will ensure all CI investigations are completed and processed. No further action are required when the CI Investigation and completed Report(s) meet(s) all of the following conditions.

- 1) The Client is not placed at any additional risk,
- 2) The facts and sequence of events in the CI Report are outlined with sufficient detail,
- 3) Preventative and corrective action through the Client's adjusted service plan is either not required or is implemented and documented,
- 4) The Client or its Representative has been given a written notice of the CI Investigation findings,
- 5) The Client or its Representative have no objections or input regarding the findings,
- 6) All mandatory CI reporting requirements to external regulatory agencies have been sent and notified,
- 7) The employee(s) who witnessed or involved in the CI was counseled for corrective or improvement actions to ensure a CI or CI event does not happen again,
- 8) The Client who witnessed or was involved in the CI was interviewed for their input regarding positive changes to be made to their Service Plan as a result of the incident.
- 9) The CI Investigation and related findings have been entered into the Agency's Quality Management System,
- 10) Client was provided the completed CI or CI event Investigations findings within (15) business days of the event,
- 11) Agency reported all reportable CI or CI events to its Agency SC and OLTL within (48) hours of the discovery of the incident, and
- 12) Agency's reports the CI to the SC and the SC enters the following information into EIM or SAMS within thirty (30) calendar days of the discovery of the incident.

8. CRITICAL INCIDENT QUALITY MANAGEMENT SYSTEM. To help the Agency learn from and better deal with CI events and prevent similar events in the future The Agency through its President will input, store and maintain all CI events, investigations and findings of facts including documentation indicating Clients who participated and those who did not wish to report the incident or declined interventions into its QMS.

8.1 AGENCY METHODS TO REDUCE THE NUMBER OF PREVENTABLE CI INCIDENTS AND CI EVENTS: Agency will review all CI, CI events and Preventable CI's annually along with inputting all CI data into the Agency's QMS for record keeping and quality management. The annual reviews will be conducted by the President with a goal to address, identify and prevent future reoccurrences of the incident(s) including doing the following:

- a. Further develop a training plan for employees and management to better deal with CI events,
- b. Improve and or make constructive changes to this Policy,
- c. Ensure staff is trained and knowledgeable on taking the necessary actions to secure the health and safety of our Clients, if a reviewed CI happens again,
- d. Help improve or make changes to Clients Service Plan as a result of the reviewed incident(s),
- e. Take the appropriate measure to prevent or mitigate recurrence of the CI event.

9. VIOLATION OF AGENCY'S CI POLICY: Employee's involved in CI's with an active and pending investigation that have found to be in direct violation of this Policy and such inactions or direct gross negligence led up to the critical incident may be removed from active service, moved to a new Client, suspended and or including immediately terminated without further notice. Agency reserves the right to suspend the employee until the investigation is completed and if unless otherwise stated in writing all employees suspension(s) are without pay.

10. EMPLOYEE REMOVAL OR SUSPENSION: Employee's involved in a CI or CI event with an active and pending investigation done by the SC or OLTL may require that the employee have no contact with the CI Client or (*request suspension*) suspend the employee until the investigation is completed. Suspension may be with or without pay based upon the circumstances of the alleged incident.

11. CLIENTS RIGHTS TO REPORT & SERVICES: Clients in any service provided by our Agency have to the right to report alleged incidents at any time. Clients are encouraged to report an incident but are not required to do so, there are adverse consequences for a Client who decides not to report an alleged incident.

▪ **The Participant Helpline:** 1-800-757-5042

Clients should and will not be terminated or threatened with loss of services because they file complaints or critical incidents reports of any kind. A Client's decision not to report an incident does not remove the responsibility of the staff member or this Agency from reporting the CI. This Agency will inform our Client through our SC within 24 hours of a reportable CI or CI event. ANY EMPLOYEE FOUND IN VIOLATION OF A CLIENT'S RIGHTS TO REPORT ANY CI, CI EVENT, ABUSE AND OR RETALIATION AS DEFINED BY THIS POLICY may be removed from active service, suspended and or including immediately terminated without further notice. Agency reserves the right to suspend the employee until the investigation is completed and if unless otherwise stated in writing all employees suspension(s) are without pay.

12. REPORTING ABUSE OR NEGLECT OF AN ADULT (59 YEARS OF AGE AND YOUNGER):

Clients in any service provided by our Agency have to the right to report alleged incidents at any time. If you report the abuse or neglect of an adult, you may remain anonymous have legal protection from retaliation, discrimination and civil or criminal prosecution. The Adult Protective Services (APS) Law, Act 70 of 2010, was enacted to provide protective services to adults between 18 and 59 years of age who have a physical or mental impairment that substantially limits one or more major life activities. The APS Law establishes a program of protective services in order to detect, prevent, reduce and eliminate abuse, neglect, exploitation and abandonment of adults in need.

▪ **Adult Protective Services Hotline:** 1-800-490-8505.

Reporting: A report can be made on behalf of the adult whether they live in their home or in a care facility such as a nursing facility, group home, hospital, etc. Reporters may remain anonymous and have legal protection from retaliation, discrimination, and civil and criminal prosecution. The statewide Protective Services hotline is available 24 hours a day.

13. REPORTING ABUSE OR NEGLECT OF AN OLDER ADULT (60 YEARS OF AGE AND OLDER):

Clients in any service provided by our Agency have to the right to report alleged incidents at any time. If you report the abuse or neglect of an older adult, you may remain anonymous have legal protection from retaliation, discrimination and civil or criminal prosecution.

▪ **Older Adults Protective Services:** 1-800-490-8505 (the statewide hotline), with concerns about the well-being of a person over the age of 60 years. Phone lines answer 24 hours a day, every day.

Reporting:

- your name, address and phone (if not anonymous)
- victim's name, address and phone (if not self-reporting)
- demographic data, if available
- description of allegations
- name of alleged perpetrator
- physical/emotional health of victim
- safety concerns

If the situation is considered "protective," the older adult

- will be provided a full evaluation to determine his/her needs
- will be provided assistance to alleviate the risk of harm
- may refuse help if he/she is of sound mind
- has the right to have all information concerning his/her case treated confidentially

AGENCY CRITICAL INCIDENT AND INJURY REPORT FORM

Instructions: Please complete Parts A and C (if incident has occurred), or Parts B and C (if injury has occurred), within 24 hours of the event occurring, and forward to Manager immediately.

Please attach extra sheets if you require more on this form.

Part A: Details of incident (etc. Client's Location or environmental damage)			
Date of incident		Time of incident	AM / PM
Nature of incident	Physical assault Verbal assault Slip and/or trip Self-harm Near miss (i.e. incident nearly occurred and could be prevented in the future) Left premises Medical condition Other		
Location of incident			
Description of incident			
Name of person who received the report		Telephone	
Reported to authorities, if appropriate?	<input type="checkbox"/> Yes Provide details (when and whom): <input type="checkbox"/> No		
Part B: Details of injury (e.g. to a staff member or consumer client) and treatment			
Date of incident		Time of incident	AM /PM
Name of injured person		Date of birth	
Exact site location where injury occurred		Telephone	
Activity in which the person was engaged at the time of injury	<i>(e.g. during a visit, in a break, in the office)</i>		

Nature of injury	<p>Sprain / strain</p> <p>Open wound</p> <p>Fracture</p> <p>Bruising (contusion) or crushing</p> <p>Burn</p> <p>Psychological injury (e.g. from aggression or harassment)</p> <p>Slip, trip or fall</p> <p>Object in the eye</p> <p>Choking</p> <p>Near miss (i.e. an injury that nearly occurred and could be prevented in the future)</p> <p>Other: _____</p>
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Body location of injury if physical (indicate location of injury on the diagram)	
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Treatment given on site		Name of treating person	<input type="checkbox"/>
Referral for further treatment?	<input type="checkbox"/> Yes Name of doctor or hospital: <input type="checkbox"/> No	Medical certificate received?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Injury management required?	<input type="checkbox"/> Yes Notify return to work coordinator <input type="checkbox"/> No	Name of return to work coordinator	
Reported to authorities	<input type="checkbox"/> Yes Provide details (when and whom): <input type="checkbox"/> No		

Witness to event (each witness may be contacted to provide an account of what happened)

Witness name		Witness phone number	
Witness name		Witness phone number	

