



# General Event Report



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## I. When to Complete a General Event Report

General Event Reports must be completed for injuries, medication errors, restraints used, thefts, death, and unusual or violent behaviors.

## II. Reporting Timeline

General Event Reporting timelines:

- A. Staff will notify an ABLED Administrator immediately for all GERs.
- B. Staff will notify family member/legal representative immediately for High GERs.
- C. Staff will notify Service Coordination immediately for High GERs.
- D. Notify CPS/APS immediately if there is allegation of abuse, neglect, or exploitation.
- E. Notify law enforcement immediately if situation warrants their involvement.
- F. Participants supported who are involved in the event may receive copies of the report when completed.

ABLED, Inc. QA/QI Committee will review and analyze information from General Event Reports to identify trends and problematic practices which may be occurring and take appropriate corrective actions to address problematic practices identified.

## III. Instructions for Completion of General Event Report

The General Event Report form will be completed as follows:

### 1. Access Therap Systems

- A. From Therap, click on “New” next to GER’s on the Individual dashboard.
- B. Select the appropriate Program Name.
- C. Select the participant’s name in the dropdown list. This will bring you to the GER form for updating. Much of the information will be pre-populated.

### 2. Enter Event Information

- A. Under the Event Information section change the date if necessary.
- B. Describe related events preceding the event in the box “Describe what happened before the event:”
- C. If the event occurred at the program address click the box indicating “Same as program address.” Otherwise fill in the address of the event.
- D. Add Event type by clicking the type of event – Injury, Medication Error, Restraint Related to Behavior, Restraint Other, Death, or Other.
- E. This will take you to a page where you will need to complete additional information.
- F. Therap will prompt you for any required or missing information.
- G. Add pictures whenever possible.
- H. Witnesses should only be completed for those actually witnessing the event. Do not include persons notified after the event or yourself as witnesses.



### **3. Enter General Information**

- A. Under the General Information Section indicate whether abuse, neglect, or exploitation were suspected and the type of abuse, neglect, or exploitation.
- B. Select the Notification Level based on Sections IV and V of this policy and your judgment as to the severity of the event.

**Once the GER is completed you can save and submit. If there are any issues the GER may be returned to you for additional Information.**

## **IV. Executive Team Review and Approval**

**The Executive Team will review, return as necessary, and approve all General Event Reports.**

The Executive Team will:

- A. Determine if appropriate action was taken.
- B. Recommend any further follow-up and/or preventative action taken/needed.
- C. Interview the person supported and informing them that information will be shared with others.
- D. If applicable, make appropriate notifications (guardian, physician, etc.).
- E. If applicable, investigate any abuse/neglect.
- F. Attempt to determine the circumstances that led to an injury of unknown cause (at a minimum, talk to staff who worked during the past 24 hours); document all staff interviewed and a plausible cause.
- G. Report any incidents involving emergency safety interventions to the participant's ISP team and the ABLED Rights Review Committee to ensure that the emergency safety intervention was appropriate.

## **V. GER High Notification Levels**

### **1. Allegations of Abuse or Neglect Regardless of Other Event Type!**

### **2. Injury**

- A. Injuries which require medical attention or treatment by physician, OR
- B. Any injuries to participants in services related to incidents involving planned or unplanned emergency safety interventions, OR
- C. Discovery of injury of unknown origin.

### **3. Injury Types/Causes**

- A. Airway obstruction
- B. Bruise suspicious in appearance, such as unusual patterns appearing as handprint or shape consistent with an object like a cord or belt, or bruising of face, buttocks, breasts or groin
- C. Choking: symptoms may include excessive coughing or gagging with meals (more than normal for the person) or difficulty breathing during or after meals
- D. Concussion: diagnosed by medical professional
- E. Dislocation: diagnosed by medical professional
- F. Fracture: diagnosed by medical professional
- G. Loss of consciousness: includes fainting if the person is unable to be aroused
- H. Poisoning
- I. Pressure ulcer



J. Falls, when an injury occurs (physical injury means harm, pain, illness, impairment of physical function or damage to body tissue)

#### **4. Medication Error**

If a medication error results in injury, serious illness, hospitalization or another high notification event; report under the categorization for the reportable event.

#### **5. Emergency Safety Intervention**

Emergency safety intervention means taking positive steps to ensure the participant's well-being in response to an emergency safety situation. The report will indicate status of either Unplanned Intervention or Intervention included in the Safety Plan.

#### **6. Restraints**

Any use of restraints whether physical, chemical, or mechanical, etc.

#### **7. Death**

Any death of a participant regardless of where the death occurred and who was present.

## **VI. Other Types of Reportable Events**

### **1. Assault**

Injuries which require medical attention to staff persons and others, resulting from behaviors of the participant as the aggressor.

### **2. Elopement**

Participant leaving staff supervision where the safety of the participant or others is potentially threatened.

### **3. Change of Condition**

When participant meets ALL of the following:

- Diagnosis of constipation/under treatment of physician AND,
- BM protocol in place and BMs already monitored AND,
- BM protocol has not been effective and participant has not had a BM in 4 days.

### **4. Complaint and/or Possible Litigation**

Allegation of abuse or neglect that does not result in an injury (abuse/neglect suspected must be checked "yes"). Complaint means an expression of concern or dissatisfaction. Allegation may be made by the participant, staff persons employed by ABLED, or people in the community pertaining to a participant.

### **5. Exploitation**

Allegation of financial exploitation OR allegation of sexual exploitation (abuse/neglect suspected must be checked "yes"). Exploitation means to obtain by deception, intimidation, or undue influence with the intent to deprive the participant of: money, property, body, work or sexually including taking pictures.

### **6. Fire**

Participant is injured or displaced as a result of fire.



**7. Hospital**

Hospital admission due to mental health/behavioral concerns, OR  
Any unplanned hospitalization or ER visit, OR  
A transfer to a different hospital (reported in the same way as a new hospitalization), OR  
Any unplanned use of urgent care facility (reported in the same way as ER visit).

**8. Law Enforcement Involvement**

Law Enforcement contacts (i.e., visits to assess or control situations) due to the behavior of a participant.  
Police or other law enforcement interaction due to a disruptive action or behavior of a participant; this may be initiated by the participant, staff persons employed by ABLED, or by people in the community.

**9. PRN Psychotropic Use**

PRN (as needed) psychotropic medications are prohibited. PRN means an administration scheme in which a medication is not routine, is taken as needed and requires assessment for need and effectiveness.