



## PROCEDURE

<b>Title/Subject: Incident/Accident Reporting</b>			
<b>Policy #: OPS - 404</b>	<b>Page 1 of 5</b>	<b>Adoption Date:</b>	<b>Revision Date: 12/09/04</b>
<b>Approved By:</b>		<b>Title: President/Chief Executive Officer</b>	
<b>Approved By:</b>		<b>Title: Program Vice President/CQI Chairperson</b>	
<b>Distribution Date:</b>			
<b>Authority Reference: COA G2, DCF ROP 215-3 and CFOP 215-6</b>			

The Florida Center for Child and Family Development (The Florida Center) ensures the safety of and/or reduces risk to clients and employees of the agency whenever possible. The purpose of this procedure is to establish a system for the identification and reporting of incidents and accidents posing a safety and/or risk management concern. All incidents and accidents must be documented and reported to designated parties within specified timelines. Reporting procedures comply with The Florida Centers' contractual agreements with the Department of Children & Families (DCF), and adhere to the requirements of CFOP 215-6 and ROP 215-3. This procedure applies to all clients, employees including independent contractors, student interns, volunteers and board members of The Florida Center.

All allegations of child abuse, neglect or exploitation must also be reported to the Florida Abuse Registry Hotline -1-800-96-ABUSE (1-800-962-2873).

### DEFINITIONS

Sentinel events are defined as any unexpected occurrences involving death or serious physical or psychological injury or risk.

#### Sentinel Events requiring a Report to the Department of Children & Families, State of Florida:

- a. Altercation. A physical confrontation occurring between a client and employee or two or more clients at the time services are being rendered, or when a client is in the physical custody of the department, which results in one or more clients or employees receiving medical treatment by a licensed health care professional.
- b. Bomb or Biological/Chemical Threat. Any threat of harm to property or persons involving a biological/chemical agent or explosive device (received in person, in writing, by telephone, electronically or otherwise).
- c. Client Death. A person whose life terminates:
  - (1) due to or allegedly due to an accident, act of abuse, neglect or other incident occurring while in the presence of an employee, in a DCF contracted facility or service center, or while in the physical or legal custody of the department; or

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7/6/2009

Incident Report Procedure

- (2) when the client is currently receiving mental health, substance abuse, developmental disabilities, adult or child welfare services from a DCF funded or contracted service provider; or
- (3) when a death review is required pursuant to CFOP 175-17, Child Death Review Procedures.
- d. Client Illness. A serious illness determined by the attending physician to be life-threatening or the result of apparent abuse or neglect, involving a client who is in the legal custody of the department.
- e. Client Injury. A medical condition of a client requiring medical treatment by a licensed health care professional sustained or allegedly sustained due to an accident, act of abuse, neglect or other incident occurring while in the presence of an employee or in a Department of Children and Families contracted facility.
- f. Elopement. The unauthorized absence beyond eight hours, or other time frames as defined by a specific program operating procedure or manual, of a child or adult who is in the legal custody of the department.
- g. Employee Arrest. The arrest of any employee for a civil or criminal offense.
- h. Employee Official Misconduct / Neglect/ Criminal Activity. Employee conduct or activity that results in potential liability for the department; death or harm to a client; or results in a law violation, including falsification of official records.
- i. Escape. The unauthorized absence as defined by statute, departmental operating procedure or manual of a client committed to, or securely detained in, a Department of Children and Families mental health or developmental services forensic facility covered by Chapters 393, 394 or 916, F.S.
- j. Media Coverage. Probable or actual media coverage or public reaction that may have an impact on the department's ability to protect and serve its clients; or other significant effect on the department. This includes the outbreak of a disease or other health occurrence that is likely to result in a high level of state or media interest.
- k. Medication Error. Medication error, including omission, incorrect medication or dosage administration error, of any client receiving residential or inpatient services or Developmental Disabilities medical case management.
- l. Sexual Battery. An allegation of sexual battery by a client on a client, employee on a client, or client on an employee as evidenced by medical evidence or law enforcement involvement.
- m. Suicide Attempt. An act which clearly reflects the physical attempt by a client to cause his or her own death while in the physical custody of the department or a departmental contracted or certified provider, which results in bodily injury requiring medical treatment by a licensed health care professional.
- n. Theft, Vandalism, Damage, Sabotage, Destruction of Property. Loss of state or private property of significant value or importance.
- o. Other Incident. An unusual occurrence or circumstance initiated by something other than natural causes or out of the ordinary such as a tornado, kidnapping, riot or hostage situation, which jeopardizes the health, safety and welfare of clients who are in the physical custody of the department.
- p. Non-Critical Other. Any incident that does not jeopardize the health, safety or welfare of staff or clients, does not fit one of the categories listed above, but that regional management

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should be advised of for purposes of remediation, follow up, planning, tracking or reference.

Sentinel Events Not requiring a Report to the Department of Children & Families, State of Florida:

- a. Client Death/Former Client. A former client (up to one year from case closure) whose life terminates regardless of cause.
- b. Client, Client's Family Member or Visitor Illness. A serious illness determined by the attending physician to be life-threatening or the result of apparent abuse or neglect, involving a client who is not in the custody of the department, the client's family member or a visitor.
- c. Elopement. The unauthorized absence beyond eight hours, or other time frames as defined by a specific program operating procedure or manual, of a child or adult who is not in the legal custody of the department.
- e. Employee Injury or Illness. Any serious medical condition of a staff member requiring medical treatment by a licensed health care professional. This must also be reported to the Human Resources Coordinator.
- f. Medication Error. Medication error, including omission, incorrect medication or dosage administration error, of any client receiving services at The Florida Center.
- g. Suicide Attempt. An act which clearly reflects the physical attempt by a client, who is not in the physical custody of DCF, or an on-duty employee to cause his or her own death.
- h. Manual Restraint. An intervention that restricts, limits, or curtails a person's freedom of movement to prevent harm to self or others. An act in which a trained staff member would need to temporarily immobilize a person in order to maintain safety.
- i. Other Incident. An unusual occurrence or circumstance initiated by something other than natural causes or out of the ordinary such as a tornado, kidnapping, riot or hostage situation, which jeopardizes the health, safety and welfare of clients who are not in the physical custody of the department.
- j. Non-Critical Other. Any incident that does not jeopardize the health, safety or welfare of staff or clients, does not fit one of the categories listed above, but that management should be advised of for purposes of remediation, follow up, planning, tracking or reference.

Routine Incidents

- a. Client, Client's Family Member or Visitor Injury or Illness: Any injury or illness to a client not requiring medical treatment by a licensed health care professional which occurs at the time agency services are rendered.
- b. Employee Injury or Illness. Any injury or illness to a staff member not requiring medical treatment by a licensed health care professional which occurs while performing job duties.

RESPONSIBILITIES

The first and primary responsibility of any employee who is involved in, or who witnesses, a critical health or safety incident is to immediately notify the appropriate medical, emergency or law enforcement personnel.

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Sentinel Events Incident/Accident Reporting

Any employee involved in a reportable incident/accident is required to notify their supervisor immediately. For the purposes of this procedure, immediately is defined as no later than one (1) hour after the incident occurs. Immediate direct face-to-face or telephone contact must be made with the supervisor or in the absence of the supervisor, the departmental Vice President. In the event the departmental Vice President is not available, another agency Vice President must be contacted immediately.

Once a Serious event/incident has been reported, it is the supervisor's responsibility to report immediately to the prospective department Vice President who is then responsible for immediate President/CEO notification when necessary. In addition, the employee must immediately complete The Florida Center's Incident/Accident Report form. Child Protective Services employees must use Coalition for Families and Children reporting form. Upon completion, the employee must immediately submit the form to the employee's supervisor who will forward it to the department Vice President for review. Incident Reports will be forwarded to all contract agencies as required.

The department Vice President will review the incident/accident report, document any additional action or measures needed, and monitor the situation until resolution and/or completion of the process. The department Vice President submits the incident/accident report form to the Quality Improvement Director within five (5) business days. The Quality Improvement Director provides Incident Report information to the Risk Management Committee for review quarterly, or more often if needed. Summary Incident Report data is also forwarded to the Executive Management Team for review.

DCF Reportable Incident/Accident

DCF will receive notification immediately, or within timeframes commensurate with the criticality of events (generally, no later than two (2) hours from discovery) on the following reportable incidents:

- ✓ Client Death
- ✓ Client Injury
- ✓ Client Illness
- ✓ Any event that is expected to generate media coverage or public reaction.

During evening hours or weekends, this notification may be extended to 9:00 a.m. the following work day at the discretion of the CEO and based upon the need for any immediate intervention by DCF management. First notification will take place by telephone, followed by an electronic report transmitted to DCF on the SunCoast Region Incident Reporting Form. The electronic report will be transmitted within 24 hours or sooner, as requested. The report will include as much specific information as is known at the time. Follow-up and/or corrective action information will be transmitted as available and appropriate. Immediate telephone notification and electronic follow-up reports will be made to:

- ✓ DCF Program Office Liaison or Contract Manager
- ✓ Regional Director or Director of Operations, if the event requires immediate intervention of DCF management, or is expected to generate media coverage or public reaction.

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An "Incidents Summary Report" will be submitted to the DCF Contract Manager no later than the 15<sup>th</sup> of each month. This report provides aggregate data summarizing all reportable incidents that have been reported (internally and to the department) and/or followed up during the previous month. Copies of all incident reports will be available to DCF personnel for review during regularly scheduled on-site monitoring visits.

#### Routine Incident/Accident Reporting

These incidents are to be reported to employee's supervisor by the end of business on the date the incident/accident occurs. End of business direct face-to-face or telephone contact must be made with the employee's supervisor, or in the absence of the supervisor, the departmental Vice President. In the event the departmental Vice President is not available, another agency Vice President must be contacted by the end of business.

In addition, the employee must complete The Florida Center's Incident/Accident Report form and submit the form to the employee's supervisor within three (3) working days of the event. Child Protective Services employees must use the Coalition for Families and Children reporting form. Upon receipt of the report, the employee's supervisor will submit the form to the department Vice President for review within three (3) working days. In the case of an employee injury or illness, notification to Human Resources must be made within twenty-four (24) hours by the employee and/or supervisor.

The department Vice President will review the incident/accident report, document any additional action or measures needed to be taken, and monitor the situation until resolution and/or completion of the process. The department Vice President will submit the incident/accident report form to the Quality Improvement Director within five (5) business days. The Quality Improvement Director will present quarterly data to the Risk Management Committee for review.

The employee's supervisor may choose to treat a moderate or routine incident/accident as serious at their discretion and will inform the employee of any changes in the required reporting requirements and time frames.

#### ADMINISTRATIVE REVIEW

The administrative review of incident/accident reports is intended to ensure completeness of the information, appropriate notification of contractors or government departments, and coordination of corrective action plans and follow-up to protect the client and/or organization from further risk or injury and to manage activities to control the situation. The Quality Improvement Council reviews all incident/accident summary reports in order to monitor trends, organizational needs and the appropriateness of corrective action plans that will minimize or prevent future risk to clients and staff. The Quality Improvement Director retains all original incident/accident reports and maintains a chronological log of occurrences.

Any request by the public, media, or an organization outside The Florida Center regarding incidents must be directed to the President/CEO. In the absence of this individual, any request must be directed to one of the departmental Vice Presidents. The Florida Center will comply with the requirements of all public records laws.

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Attachment:  
Incident Report Forms  
Program Office Contacts

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Incident Report Procedure

6

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