



### Critical Incident Management

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- FNHC is a state funded provider, therefore each and every employee who works for FNHC is mandated to report a critical incident as specified in this state compliant Critical Incident Management Policy.
  - ❖ In cases of suspected **Abuse, Neglect, Exploitation, or Abandonment, or Suspicious Death**, the network provider, employee, etc. must take immediate action to assure the participant's health and safety by contacting emergency medical services or law enforcement as needed.
- FNHC is the network provider, therefore employees of FNHC must take the initial steps listed above. Ultimately, the client's health and safety are our main priority.
  - ❖ **Within 24 hours, a verbal report must be made to Adult Protective Services (APS) Hotline at 1-800-490-8505 or 1-888-243-6561 for after-hours calls. For online access, use the following link:**  
<http://dhs.pa.gov/citizens/reportabusedhsadultprotectiveservices/>
- All FNHC caregivers will be required to contact the Office Staff or Management within **8 Hours** of the incident. FNHC Office Staff or Management will then contact APS within **24 hours** if they have not been contacted already.

## Procedure

- If an incident involves **sexual abuse, serious injury, serious bodily injury, or suspicious death**, FNHC caregiver staff will take the following steps:
  - I. Call 911 and make an immediate **oral report to law enforcement** (local office). This can be done either by the caregiver, FNHC Office Staff or Management. Within **48 hours** of making the 911 oral report, FNHC Office Staff or Management will submit a written report to law enforcement.
  - II. FNHC Office Staff will make an oral report within **24 hours** to the **Department of Aging**:
    - Under age 60: **717-265-7887 Option #3**
    - Over age 60: **717-265-7887 Option #2**
- Here is a list of Critical Incidents that **MUST** be reported:
  - I. **Hospitalizations** (unplanned only)
  - II. **Emergency Room Visits**
  - III. **Service Interruption** (only if health & safety at risk & back up plan failed)
    - Examples include caregiver calling off with no coverage, involuntary termination by providing agency, and if family member tried to help participant but cannot meet health and safety needs.
  - IV. **Abuse**
    - Examples include: Physical harm, sexual harassment, assault, or abuse, humiliating or verbal assaulting, improper medication use & type, threatening to harm, etc.
  - V. **Neglect**
    - Examples include self-neglect, passive or active neglect by caregiver, seclusion, **\*\*ABANDONMENT\*\***, withholding meals/meds, not providing access to hygiene and/or biological needs, isolation, failing or refusing to meet participants ADL's.
  - VI. **Exploitation**
    - Examples include: Using participants debit/credit card for personal purchases, "borrowing" money from participant, deceiving/coercing participant into turning over possession ownership, persuading participant to switch home care agencies.
  - VII. **Restraint**
    - Examples include: Physical restraints, chemical (drugs), mechanical intervention.

- **\*\* Use of restraints & seclusion limit individuals' movements, access to other individuals, locations, activities, or restricts participants rights. \*\***

VIII. **Death (naturally caused death excluded)**

IX. **Serious Injury** (resulting in medical attention)

X. **Medication Errors** (resulting in medical intervention, ER, hospitalization)

XI. **Provider or Staff Misconduct**

- Examples include improper staff behavior at participants home during services and allegations or crime against paid caregiver as reported by participants, family, providers, etc.

❖ **\*\* When reporting, please keep in mind to document who, what when, and where of the incident. \*\***

▪ **When to report:**

- I. When providing service.
- II. When contracted to provide service but unable to do so.
- III. When agency becomes aware of an incident outside service hours.

▪ A Critical Incident is **NOT**:

- I. A complaint associated with the dissatisfaction of program operations, activities or services received, or not received, involving home and community-based services.
- II. A concern related to benefit denials or the grievance (appeal) of a denial of service.
- III. Program fraud, waste, or abuse.
- IV. Other events where it is important to notify the participants service coordinator, but do not meet the criteria of a critical incident.

## **Prevention/Management**

▪ FNHC will prevent potential critical incidents by performing the following:

- I. Instructing all employees on what critical incidents are for a thorough understanding.
- II. Instruct employees on how to prevent critical incidents by going over it in the FNHC Employee Training that is performed at the start of employment and annually from there on out.
- III. FNHC quarterly checks and monitors critical incidents to evaluate if there is a trend or relation to critical incidents.
- IV. Once evaluated, FNHC will implement the appropriate steps to prevent the previous critical incidents from happening.
- V. Evaluation of critical incidents are performed quarterly.

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Employee

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Date