

# The Basics of Incident Management

The Incident Reporting Cycle from Discovery to Closure

# Purpose |



To provide a high-level overview of the incident management process, specifically the path of an incident report in the incident reporting system, from discovery through closure. This includes regulatory timeframes, the steps involved in the review process, the impacts of a management review that results in a "Not Approved" status, and how to monitor incidents.

Note: The Bureau of Supports for Autism and Special Populations (BSASP) has a different organizational structure that impacts the incident workflow.

# **Topics**



- Definitions
- Reporting Timeframes by Category
- First Section Submission
- Initial Management Review
- Investigations and Administrative Reviews
- Final Section Finalization
- Extensions
- County Management Review
- ODP Regional Management Review
- Closure
- Using the EIM My Workload Dashboard to Monitor Incident Timeliness

#### **Definitions**



<u>Discovery Date</u>: the date and time an actual, suspected or alleged incident is discovered by a person who is responsible to recognize and report.

Occurrence Date: the date the actual, suspected or alleged incident occurred.

<u>Initial Reporter</u>: any person who witnesses or experiences the incident, is informed of an allegation of an incident, or is the first to discover or recognize the signs of an incident.

<u>Point Person</u>: a person that receives information from an initial reporter and is responsible to manage the incident from beginning to end.

<u>First Section Submission</u>: the action of the Provider or SCO submitting an incident first section in the incident reporting system by clicking the "Submit" button.

<u>Finalize</u>: the action of the Provider or SCO finalizing an incident final section in the incident reporting system by clicking the "Submit" button.

<u>Closed</u>: when the final section is approved by ODP. The incident moves to a "Closed" status.

# **Determining Discovery Date**



The **Discovery Date** determines the first and final section due dates. So how do we determine the discovery date?

The discovery date is the date and time when a person, required by regulation, policy and/or law to report, first becomes aware of an actual, suspected or alleged reportable incident involving an individual receiving services. This includes employees, contracted employees and volunteers of an ODP provider or SCO as well as those paid to provide HCBS services through an ODP service model such as Participant Directed Services (PDS - AWC and VF/EA).

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#### Initial Reporters: Who They Are and Why It Matters



# Those with a Responsibility to Recognize and Report

These are people required by regulation, policy, or law to report incidents. This includes:

- · Provider employees
- Contracted staff
- Volunteers
- Supports Coordination Organizations (SCOs)
- People paid to provide HCBS services including those through the PDS model (AWC and VF/EA)

#### Those without a Responsibility to Recognize and Report

These are people not bound by regulation to report, such as:

- Individuals
- Family members (unpaid)
- Friends
- Neighbors
- Community members
- Anyone not paid and trained in a formal caregiver role

#### Why This Distinction Matters for Discovery Date:

- The discovery date is the date and time when a person who is required to report becomes aware of an actual, suspected or alleged incident.
- When someone without a reporting obligation (like an unpaid family member) is the initial reporter, the discovery date and time is not when they became aware of an actual, suspected or alleged incident. Instead, it is the date and time when they inform a person who is responsible to report.



## **Break for Questions**

# Reporting Timeframes by Category



24 Hours	
Abuse	Passive Neglect
Behavioral Health Crisis Event	Rights Violation
Death	Self-Neglect
Exploitation	Serious Illness
Fire	Serious Injury
Law Enforcement Activity	Sexual Abuse
Missing Individual	Site Closure
Neglect	Suicide Attempt

# **72 Hours**Physical Restraint

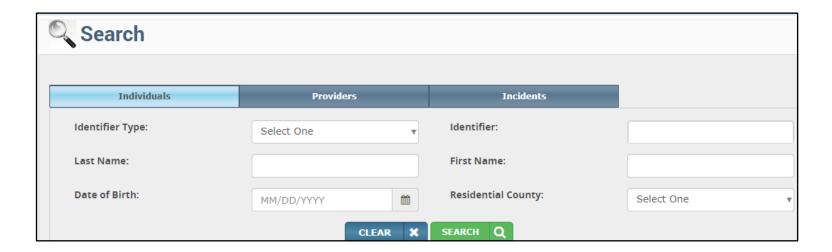
**Medication Error** 

#### First Section Submission



All incidents, alleged incidents and suspected incidents are to be submitted in Department's information management system within 24 or 72 hours of the discovery date and time.



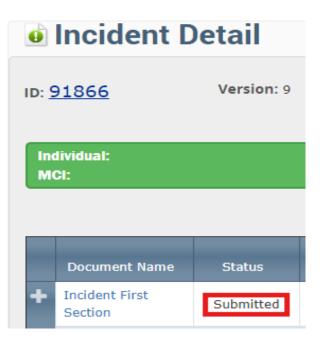


#### First Section Submission



The Incident Detail page of the incident will reflect the status of all incident documents. It is important to ensure the status of the Incident First Section is **Submitted**.

If EIM is unavailable, the submission of incidents is to occur by completing the Services for Individuals with an Intellectual Disability or Autism Incident Report form, DP 1081, Attachment 3 of the IM Bulletin <a href="https://dx.ncbment+3+DP+1081.pdf">https://dx.ncbment+3+DP+1081.pdf</a>. Record the reason the incident is not entered in the Department's information management system

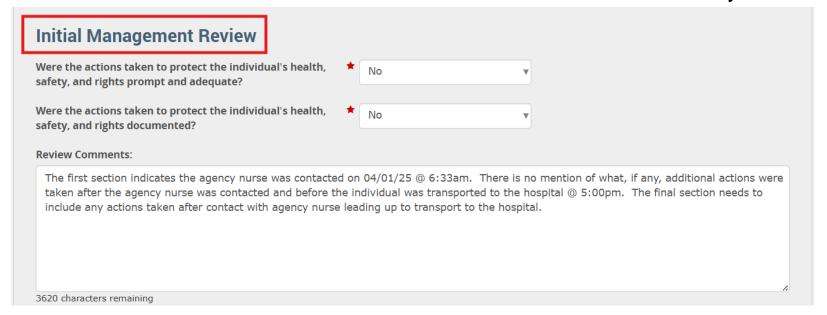


All incidents submitted using this form must be entered into the Department's information management system as soon as possible after resolution of the issue(s) that prevented entry. The form must be sent to the appropriate ODP entities (ODP regional office, BSASP office, County ID program/AE) in the most efficient mode possible. This includes via a secure electronic notification, which is HIPAA compliant.

## **Initial Management Review**



An Initial Management Review is conducted by the County ID Program/AE and ODP to determine if appropriate actions to protect the individual's health, safety, and rights have occurred. This review is conducted within 24 hours of the submission of the Incident First Section. All comments entered by the AE/County ID Program and/or ODP during the Initial Management Review of an incident shall be addressed in the Final Section. If one of the two questions in either initial management review are answered "No" an alert will be sent the workload dashboard. \*BSASP does not include a County Review\*



#### Investigations and Administrative Reviews



✓ The Certified Investigator Report (CIR) and Administrative Review (AR) must be submitted within 30 days of discovery of the incident by a staff person, unless the provider notifies the Department in writing that an extension is necessary and the reason for the extension

✓ The CIR and AR must be finalized in EIM before the Incident Final Section can be finalized.

### **Final Section Finalization**



- ✓ Contains updated and additional detail about the incident that was not available or included in the Incident First Section
- ✓ Includes the investigation determination
- ✓ Additional actions taken to protect the health, safety and well-being of the individual
- ✓ Corrective Action in response to an incident and to prevent recurrence
  of the incident
- ✓ Finalized within 30 days of the discovery date, unless the provider notifies the Department in writing that an extension is necessary and the reason for the extension

#### Extensions



- ✓ Once started, incidents must progress through the submission and review process on a set time schedule.
- ✓ If situations arise making it impossible to complete documents within 30 days of discovery, the reporting entity must inform the Department in writing prior to the original due date.
- ✓ Report extensions cannot exceed thirty (30) days per each extension.
- ✓ The reason for needing an extension must be noted for an updated due date to be applied.
- ✓ Once the extension request is completed, the due date will be updated to reflect the new due date.

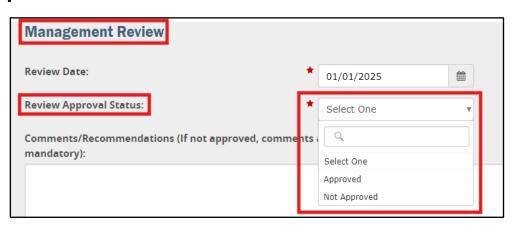
# County Management Review



Upon finalization of the Incident Final Section by the provider or SCO, the County evaluates the entire incident Report.

If the County determines all necessary actions have taken place and additional information is not needed, the incident will be **Approved**.

If the County determines additional information is needed, the documented response & actions by the reporting entity are inadequate, or something else needs to be addressed, the incident will be **Not Approved**.



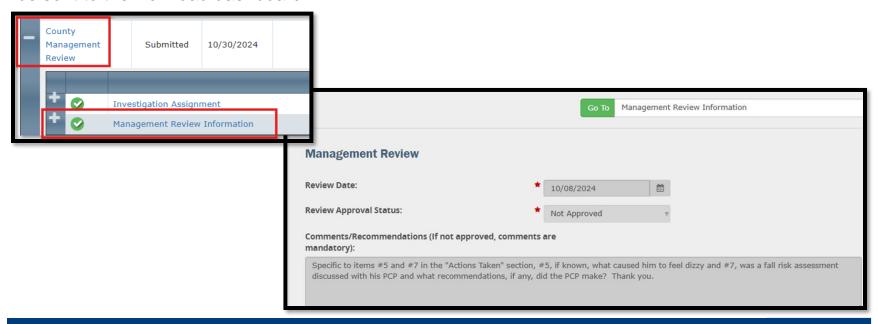
The reporting entity has 10 calendar days from the date of the Disapproval to respond and finalize a new version of the Incident Final Section. If an incident Final Section is "Not Approved", an alert will be sent to the workload dashboard.

\*BSASP does not include a County Review\*

# ODP Regional Management Review



- The last entity to review an incident is ODP. If ODP determines all necessary actions have taken place and additional information is not needed, the incident will be **Approved**.
- If additional information is needed, the documented response and actions by the reporting entity are inadequate, or something else needs to be addressed, the incident will be **Not Approved**.
- The reporting entity has 10 calendar days from the date of the Disapproval to respond and finalize a new version of the Incident Final Section. If an incident Final Section is "Not Approved", an alert will be sent to the workload dashboard.

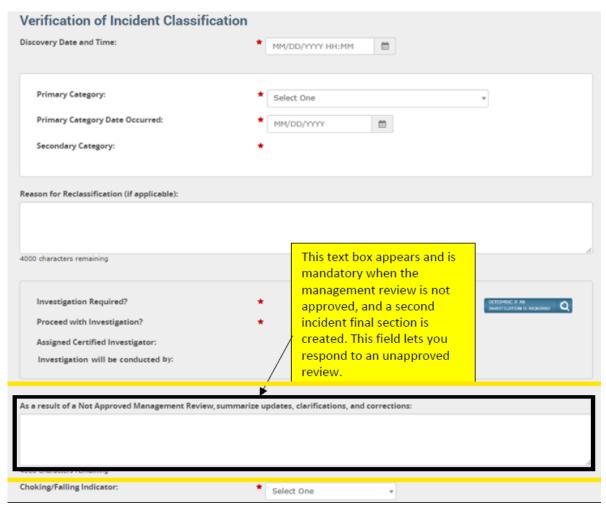


# Response to Management Review



When a County or Regional Management Review results in a Not Approved status, the response shall be documented in the designated text field in the Final Section.

A Guide to Responding to a
Not Approved Management
Review expands on the
review process, Not Approved
reviews, and updating the
information within the areas of
the report needed based on
the reasons the incident was
Not Approved and reviewer
comments.

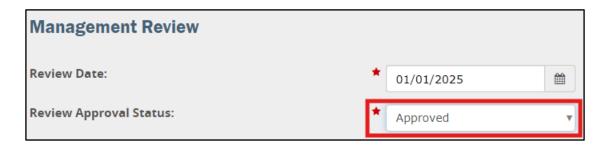


### Closure



When ODP **Approves** the incident through the Management Review process, the status of the incident will be **Closed**.

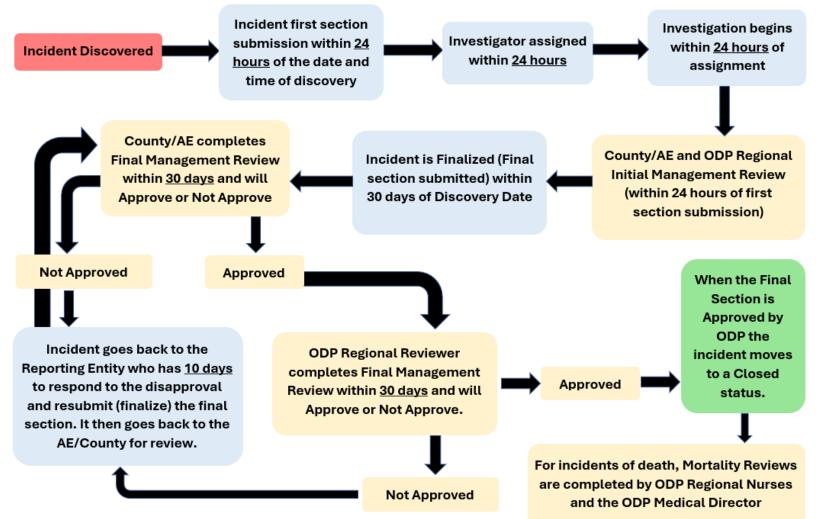
The incident cannot be edited by anyone who has access to the reporting system after the status of the incident is Closed.





#### Incident Reporting Timeline and Review Cycle





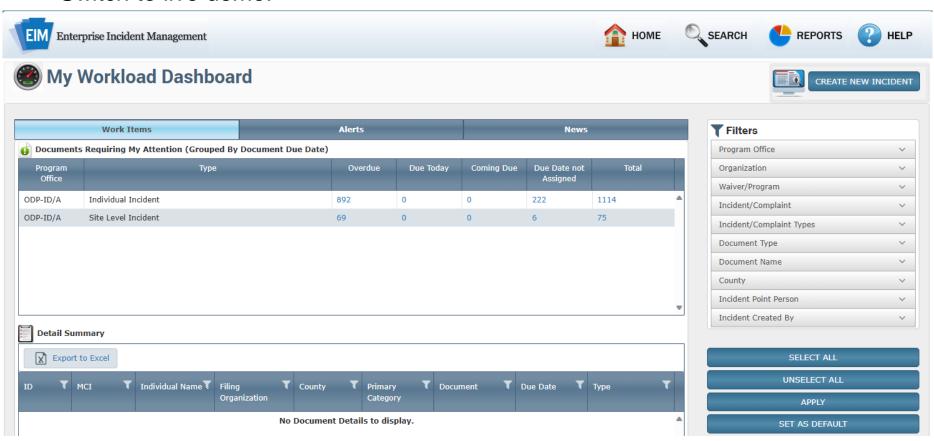


## **Break for Questions**

# **Monitoring Timeliness**



#### Switch to live demo.



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# My Workload Dashboard





Overdue: Meaning these are incidents that have a due date that has already passed.

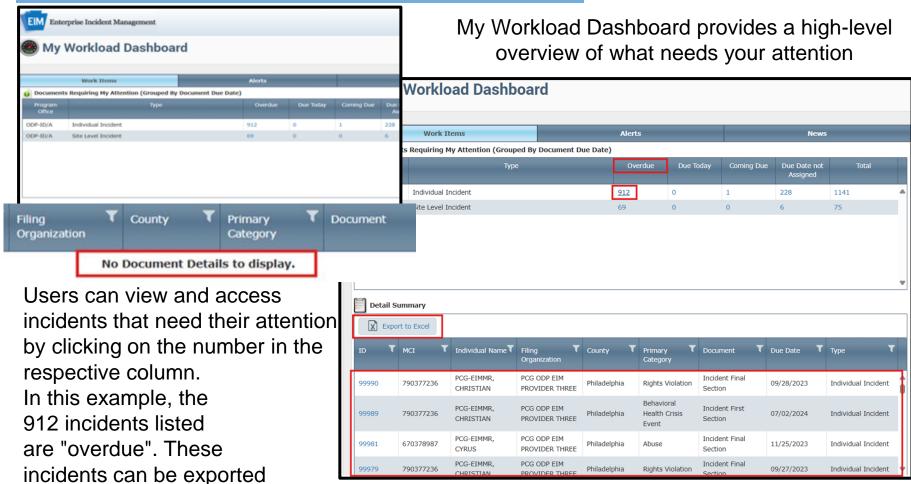
Due Today: Meaning the incident due date is today.

Coming Due: Meaning the incident is not due today, but it will be coming due the next day or in less than 30 days. Incidents where an extension was filed will also appear in this column, they will not show as overdue until that extension has expired.

**Due Date not Assigned:** Meaning this incident has just begun and the components which help decide the due date such as the Incident Primary and Secondary Categories and the Discovery Date have not yet been selected.

# My Workload Dashboard

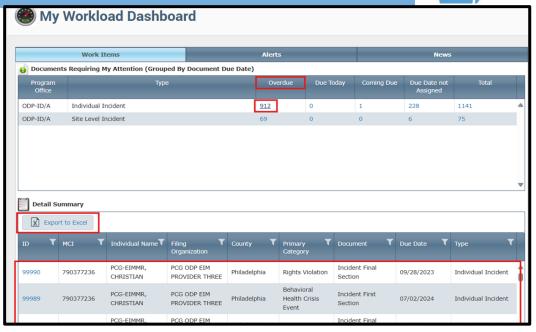




to Excel by clicking the [Export to Excel] button.

# My Workload Dashboard







#### Resources



#### Questions related to:

Incident Management Policy RA-impolicy@pa.gov

Enterprise Incident Management (EIM) RA-PWODPEIMASSIST@pa.gov

Resources located on the Learning Management System (LMS):

A Guide to Working with Alerts

A Guide to Responding to a Not Approved Management Review

A Guide to My Workload Dashboard