

Employment and Community First CHOICES (ECF CHOICES)

Critical incident management

ECF CHOICES

The purpose of Employment and Community First CHOICES is to support people with intellectual and developmental disabilities (I/DD) to:

- Have competitive integrated employment
- Have a full life
- Develop relationships and have friends to spend time with
- Live as independently as possible
- Fade paid supports whenever possible

Nonreportable events and tiers of reportable events in ECF CHOICES

Types of events

- Nonreportable events
- Tier 3 ECF CHOICES reportable events
- Tier 2 ECF CHOICES reportable events
- Tier 1 ECF CHOICES reportable events

Nonreportable events

Nonreportable events

- Providers are expected to document, review, address, track and trend nonreportable events because of the potential to positively impact quality of care and health and safety for all members served by that provider.
- Each provider's nonreportable events and internal tracking and trending efforts shall be reviewed as part of ongoing quality monitoring efforts by the MCO and Department of Intellectual and Developmental Disabilities (DIDD).

Nonreportable events (cont.)

- Nonreportable events are not reportable outside of the provider agency and do not rise to the level of being considered a critical incident, but they require providers to document, address the event and track and trend due to the potential to impact the member's safety and quality of support.
- Nonreportable events are not reported to the MCO or DIDD except if a provider's internal review determines the event rises to a level of a Tier 1, Tier 2 or a Tier 3 medical/behavioral reportable event.
 - Providers would then need to report Tier 1 and Tier 2 reportable events to the MCO and DIDD and Tier 3 medical/behavioral reportable events only to the MCO.

Nonreportable events (cont.)

Nonreportable events include:

- Allegations that provider personnel (employees, volunteers) engaged in disrespectful or inappropriate communication (e.g., humiliation, harassment, threats of punishment or deprivation, intimidation or demeaning or derogatory communication [vocal, written, gestures]), or any other similar acts that do not meet the definition of emotional or psychological abuse and which are not directed to or within eyesight or audible range, about a person supported
- Failure to provide goods or services when such failure does not result in injury or probable risk of serious harm (i.e., does not meet neglect threshold)

Nonreportable events (cont.)

(Continued from previous list)

- Minor injury not requiring medical treatment beyond first aid by a lay person and not associated with abuse or neglect
- Staff misconduct that falls outside the definitions for Tier 1 or Tier 2 Reportable Events or Tier 3 Reportable Medical and Behavioral Events and does not result in serious injury or probable risk of serious injury (e.g., failure to follow the person-centered service plan [PCSP], behavioral support plan [BSP] or dining plan when such action or inaction poses no probable risk of serious injury; staff convenience [e.g., taking a person with you to run personal errands rather than supporting the person in the activities they choose]; or minor traffic violation while transporting person)

Nonreportable events (cont.)

If the provider determines what seemed to be nonreportable actually is reportable, then:

- If it is determined to be a Tier 1 reportable event, the provider will immediately notify DIDD by a phone call to the appropriate hotline number in the corresponding region and submit an *ECF Reportable Event Report Form* via data exchange by the close of the next business day.
- If it is determined to be a Tier 2 reportable event, the provider will notify the MCO and DIDD following the standard Tier 2 process (via data exchange) by the close of the next business day.
- If it is determined to be a Tier 3 reportable (medical or behavioral) event, the provider will notify the MCO within two business days following the standard Tier 3 process (via data exchange).

All subsequent processes, including investigation, review, etc. shall proceed as required for each tier.

Discrimination reporting

- Nonreportable events involving inappropriate communication (vocal, written, gestures) that include discriminatory statements, whether within or not within eyesight or audible range, must be reported to the MCO via email at ECF-REF@amerigroup.com.
 - In instances of a Tier 2 event, you would already be reporting this, so you do not see a change in the process.
 - However, in instances of a nonreportable event (that typically is not reportable), the provider will send the report to the MCO via email and indicate it is a nonreportable event.

Tier 3 reportable medical and behavioral events

Tier 3 reportable medical and behavioral events

Tier 3 reportable medical and behavioral events are only reported to the MCO (not to DIDD) on the *Reportable Event Report Form*.

Tier 3 reportable medical events

Tier 3 reportable medical events include:

- Deaths (other than those that are unexpected/unexplained)
- ER visits
- Any inpatient observation or admission (acute care, long-term acute care or skilled nursing facility/nursing facility)
- Use of CPR or an automated external defibrillator (AED)
- Choking episode requiring physical intervention (e.g., use of abdominal thrust or Heimlich maneuver)
- Fall with injury (including minor or serious)
- Insect or animal bite requiring treatment by a medical professional

Tier 3 reportable medical events (cont.)

(Continued from previous slide)

- Stage II and above pressure ulcer
- Staph infection
- Fecal impaction
- Severe dehydration requiring medical attention
- Seizure progressing to status epilepticus
- Pneumonia
- Severe allergic reaction requiring medical attention
- Victim of natural disaster (natural disasters affecting multiple individuals do not require multiple individual reports)

Tier 3 reportable behavioral events

Tier 3 reportable behavioral events include:

- Criminal conduct or incarceration
- Engagement of law enforcement
- Sexual aggression if not specifically being addressed through a BSP or if being addressed in BSP but instance of sexual aggression is considered new or unusual for the person
- Physical aggression if not being addressed through a BSP or if being addressed in BSP but instance of physical aggression is considered new or unusual for the person
- Injury to another person as a result of a behavioral incident of a person supported
- Suicide attempt

Tier 3 reportable behavioral events (cont.)

(Continued from previous slide)

- Self-injurious behavior if not specifically being addressed through a BSP or if being addressed in BSP but instance of self-injurious behavior is considered new or unusual for the person
- Property destruction greater than \$100
- Swallowing inedible/harmful matter if not specifically being addressed through a BSP or if being addressed in BSP but instance of swallowing inedible/harmful matter is considered new or unusual for the person
- Behavioral crisis requiring protective equipment, manual or mechanical restraints, regardless of type or time used or approved by PCSP (all take-downs and prone restraints are prohibited)

Tier 3 reportable behavioral events (cont.)

(Continued from previous slide)

- Behavioral crisis requiring PRN psychotropic medication
- Behavioral crisis requiring crisis intervention (i.e., call)
- Behavioral crisis requiring in-home stabilization (SOS participants only)
- Behavioral crisis requiring out-of-home therapeutic respite
- Psychiatric admission (or observation), including in acute care hospital

Tier 3 reporting requirements

The ECF CHOICES provider incident management coordinator or designee will submit a written *ECF Tier 3 Reportable Event Report Form* via data exchange to the MCO within two business days after occurrence or discovery of occurrence.

Tier 3 reporting requirements (cont.)

The provider's supervisory staff (including clinical staff, as applicable) is also required to review the event in order to determine and complete appropriate follow-up, which may include, as appropriate:

- Follow-up with the person's PCP (or behavioral health provider, as applicable) to provide information and determine any needed treatment adjustments
- Follow-up with the person's support coordinator regarding any needed adjustments in the PCSP
- Targeted training or assistance for provider agency staff who support the person

Tier 2 reportable events

Tier 2 reportable events

Tier 2 reportable events include:

- Allegations that provider personnel (employees, volunteers) engaged in disrespectful or inappropriate communication about a person supported [e.g., humiliation, harassment, threats of punishment or deprivation, intimidation or demeaning or derogatory communication [vocal, written, gestures]], or any other similar acts that do not meet the definition of emotional or psychological abuse but which are directed to or within eyesight or audible range of the person supported

Tier 2 reportable events (cont.)

(Continued from previous slide)

- Person whose whereabouts are unknown and could likely place him or her in a dangerous situation for self or others; this event is reportable if the whereabouts of the member are unknown for 60 minutes or more if the absence is unusual, unless a shorter time is specified in the person's PCSP or BSP or the absence is a known risk as specified in the person's PCSP or the BSP; reporting that a member's whereabouts are unknown is in addition to, and not a substitute for or priority over, actively looking for the member and contacting law enforcement if necessary
- Note: This requirement should not result in persons supported not having freedom to come and go without staff supervision, except when such restrictions are necessary and are documented in the PCSP in accordance with the federal home- and community-based services (HCBS) rule

Tier 2 reportable events (cont.)

(Continued from previous slide)

- Minor vehicle accident not resulting in injury that requires face-to-face medical treatment by someone other than a lay person
- Victim of fire
- Unsafe environment (cleanliness/hazardous conditions not otherwise expected to normally exist in the environment)
- Use of manual restraint, mechanical restraint and/or protective equipment that has been approved for use in the person's PCSP or BSP but used incorrectly or other than as intended (note: events determined to be completely outside of an approved PCSP or BSP or intentionally inappropriate or intentionally in violation of guidelines specified in the person's PCSP or BSP shall be considered Tier 1 and therefore, Tier 1 reporting requirements must be followed)
- The deliberate misplacement, exploitation, or wrongful temporary or permanent use of belongings or money valued at less than \$500 (i.e., less than the threshold for misappropriation)

Tier 2 reportable events (cont.)

(Continued from previous slide)

- Medication variance resulting in the need for observation, which may include the need to seek practitioner care or advice but does not require face-to-face medical treatment (including treatment by provider's trained medical staff, physician services, emergency assistance or transfer to an acute inpatient facility for stabilization) because there is no injury or probable risk of serious harm
 - Variance involving:
 - Medication omission
 - Wrong drug
 - Wrong dose
 - Wrong person
 - Wrong time
 - Wrong rate
 - Wrong preparation
 - Wrong route of administration

Tier 2 reporting requirements

- The ECF CHOICES provider incident management coordinator or designee will submit a written *ECF Reportable Event Report Form* via data exchange to both DIDD and MCO by close of the next business day after occurrence or discovery of occurrence.
- Reporting to both entities allows for tracking and trending at two important levels: the MCO level, which is part of the broader provider network management, and the state level across MCOs and programs.

Tier 2 reporting requirements (cont.)

- The MCO will be responsible for reviewing all Tier 2 *Reportable Event Report Forms* for completeness and for ensuring the reportable event has been appropriately identified as Tier 2.
- The MCO will provide written notification to the ECF CHOICES provider confirming the Tier 2 status of the event.
- If the MCO determines the Tier 2 reportable event needs to be reclassified, the MCO will amend the *Reportable Event Report Form* and follow the other appropriate requirements for the reclassified reportable event.

Investigation of Tier 2 reportable events

- ECF CHOICES providers are responsible for conducting investigations and submitting an investigation report to MCO(s) that serve the involved ECF CHOICES member(s) within 14 calendar days of the provider submitting the Tier 2 *Reportable Event Report Form* to the MCO.
- In extenuating circumstances beyond the provider's control, an ECF CHOICES provider may request one seven-calendar-day extension.
- The request must be made to the MCO at least two business days before the 14-calendar-day deadline. If the request is granted, the investigation shall be completed and submitted to the MCO within 21 calendar days of the date the provider submitted the Tier 2 *Reportable Event Report Form* to the MCO.

Investigation of Tier 2 reportable events (cont.)

- MCOs are responsible for reviewing investigation reports submitted by the ECF CHOICES provider within 30 calendar days of the date the provider submitted the Tier 2 *Reportable Event Report Form* to the MCO. The MCO will also conduct any follow-up review the MCO determines is needed.
 - If additional review is needed, the MCO shall complete such review in no more than 14 calendar days following the date the MCO advised the provider that the MCO intends to conduct additional review. The MCO may request from TennCare one seven-calendar-day extension only upon extenuating circumstances beyond the MCO's control and shall issue its findings to the provider no later than 30 calendar days following the MCO's receipt of the provider's investigation report, including any actions that will be taken by the MCO pertaining to the reportable event or the provider's investigation. This may include but is not limited to sanctions (e.g., a corrective action plan) and/or referral to the MCO's Quality Management Review Committee.
- The MCO submits all reportable data, including actions taken, for Tier 2 reportable events to DIDD for purposes of tracking and trending.

Tier 2 reportable events: policy on administrative leave or nondirect contact

- ECF CHOICES providers shall determine, at their discretion and in accordance with their agency's policy, whether to remove an employee or volunteer named in a Tier 2 reportable event from any or all direct support to CHOICES and ECF CHOICES members until the provider has completed their investigation and until the completion of any corrective action (e.g., training) if deemed appropriate.
- In lieu of removing an employee or volunteer named in a Tier 2 reportable event from any or all direct support to CHOICES and ECF CHOICES members, the provider may opt to utilize a modified assignment or increased supervision.
- The provider is expected to ensure that adequate steps are taken for the protection and safety of all CHOICES and ECF CHOICES members during the investigation process.

Tier 1 reportable events

Tier 1 reportable events

Tier 1 reportable events include:

- Allegations or suspicion of abuse (physical, sexual and emotional/psychological), neglect or exploitation resulting in physical harm, pain or mental anguish
 - Abuse, neglect and exploitation shall be defined as in TCA 33-2-402 and implemented as specified in TennCare protocol
- Sexual abuse includes but is not limited to actions by which a person is coerced into sexual activity (forced, tricked, induced or threatened) or exposed to sexually explicit material or language
 - Sexual battery by an authority figure as defined in T.C.A. § 39-13-527 is also considered sexual abuse; sexual abuse in this situation occurs whether or not a person is able to give consent to such activities
- All unexplained or unexpected deaths (including suicide)
- Serious injury, including serious injury of unknown cause

Tier 1 reportable events (cont.)

(Continued from previous slide)

- Serious injury is any injury requiring face-to-face medical treatment beyond first aid by a lay person, including but not limited to:
 - Fractures
 - Dislocations
 - Concussions
 - Cuts or lacerations requiring sutures, staples or Dermabond
 - Torn ligaments (i.e., a severe sprain) or torn muscles or tendons (i.e., a severe strain) requiring surgical repair
 - Second- and third-degree burns
 - Loss of consciousness

Tier 1 reportable events (cont.)

(Continued from previous slide)

- A suspicious injury (where abuse or neglect is suspected or the nature of the injury does not coincide with explanation of how injury was sustained)
- Vehicle accident while transporting person resulting in injury requiring face-to-face medical treatment beyond first aid by a lay person; serious traffic violation with significant risk of harm (e.g., reckless, careless or imprudent driving; driving under the influence; speeding in excess of 15 miles per hour over the speed limit)
- Theft by provider personnel (employees or volunteers) of more than \$500 (Class E felony)

Tier 1 reportable events (cont.)

(Continued from previous slide)

- Medication error resulting in the need for face-to-face medical treatment based on injury or probable risk of serious harm, including provider's trained medical staff, physician services, emergency assistance or transfer to an acute care facility for stabilization; errors involving:
 - Medication omission
 - Wrong drug
 - Wrong dose
 - Wrong person
 - Wrong time
 - Wrong rate
 - Wrong preparation
 - Wrong route of administration

Tier 1 reporting requirements

- Tier I reportable events must be reported by the provider to DIDD immediately but no later than four hours after occurrence or discovery of occurrence. Report to DIDD using appropriate hotline number in the corresponding region:
 - DIDD is available 24/7 via Investigations Hotlines for Tier 1 reportable event reports
 - East: 1-800-579-0023
 - Middle: 1-888-633-1313
 - West: 1-888-632-4490
- The ECF CHOICES provider incident management coordinator or designee must submit a written, preferably typed, *ECF Reportable Event Report Form* via data exchange to both DIDD and the MCO by close of the next business day after the telephone report to DIDD is made.

Tier 1 investigations and follow-up

- All Tier 1 reportable events will be investigated by DIDD and also reviewed by the MCO for potential quality issues.
- Subsequent action will be taken by the MCO as needed if a reportable event is determined to be a critical incident, per their established policy.

Investigation of Tier 1 reportable events

- DIDD will issue to the provider and the appropriate MCO an initial notification of intent to investigate via data exchange by close of the next business day.
- DIDD will complete its investigation within 30 days of notification of the reportable event.
- DIDD will simultaneously provide the completed critical incident investigation report to the provider and MCO.
- If abuse is substantiated, DIDD will, at the same time they provide the completed critical incident investigation report to the provider and MCO, submit notification of a referral to the Abuse Registry Referral Committee.
- The ECF CHOICES provider and the MCO will not move forward with their own reviews if a Tier 1 reportable event has been reported to DIDD.

Investigation of Tier 1 reportable events (cont.)

If DIDD reviews the reportable event and determines it is not Tier 1:

- DIDD will amend the *ECF Critical Incident Report Form* and send to the provider and the appropriate MCO via data exchange by close of the next business day.
- DIDD will send any supporting documentation to the MCO via data exchange by the close of the next business day.

Upon receiving the reclassified event, the MCO will follow established processes for Tier 2 or Tier 3 reportable events. The MCO's required timelines will begin the day the MCO receives the amended *ECF Critical Incident Report Form* and supporting documentation from DIDD via data exchange.

Tier 1: administrative leave or nondirect contact

ECF CHOICES providers are required to immediately remove an employee or volunteer named in Tier 1 allegations of physical or sexual abuse from providing direct support to all ECF CHOICES and CHOICES members until DIDD has completed their investigation, either by placing the named employee or volunteer on administrative leave or in another position in which he or she does not have direct contact with, or supervisory responsibility for, the person(s) supported.

Tier 1: administrative leave or nondirect contact (cont.)

- In a Tier 1 reportable event other than alleged physical or sexual abuse, ECF CHOICES providers shall determine, at their discretion, whether to remove an employee or volunteer named from any or all direct support to CHOICES and ECF CHOICES members until the provider has completed their investigation and until the completion of any corrective action (e.g., training) if deemed appropriate.
- In lieu of removing an employee or volunteer named in a Tier 1 reportable event other than alleged physical or sexual abuse from any or all direct support to CHOICES and ECF CHOICES members, the provider may opt to utilize a modified assignment or increased supervision.

Tier 1: administrative leave or nondirect contact (cont.)

Other expectations:

- The provider is expected to ensure that adequate steps are taken for the protection and safety of all CHOICES and ECF CHOICES members during the investigation process.
- The provider shall instruct all staff that the facts and circumstances being investigated are not to be discussed with anyone except the DIDD investigator or law enforcement officers.
- The DIDD investigator shall notify the provider that the person may return to work or volunteer status, as applicable, as soon as possible if determined before the investigation report is completed.

Exceptions to administrative leave and noncontact requirements

Providers (i.e., the incident management coordinator or agency management, and not the named employee or volunteer) may request an exception to this requirement if:

1. They furnish evidence of consent from the alleged victim (and legal representative of the alleged victim, if applicable)
2. There are no presumed risks to other persons supported that the named employee or volunteer might come into unsupervised contact with
3. Other conditions, such as increased supervision and unannounced visits to the home by provider management, are undertaken; this could include modification of assignment short of full administrative leave (e.g., in the case of an allegation of neglect based on failure to follow a dining plan, the employee or volunteer might be restricted from dining plan activities or permitted to administer the dining plan only under direct supervision); such requests are reviewed and either approved or denied expeditiously by the DIDD Director of Investigations

Adult and child protective services

Remember: Critical incidents involving abuse, neglect or financial exploitation are to be reported to Adult Protective Services or Child Protective Services as appropriate within 24 hours of discovery, pursuant to Contractor Risk Agreement Section 2.9.6.11.17. Please remember the 24-hour time frame is not calculated by business day(s). This time frame is calculated by actual clock hours.

Adult Protective Services contact information

- Phone: 1-888-277-8366
- Fax: 1-866-294-3961

Child Protective Services contact information

- 1-877-237-0004

Tracking and trending

Tracking and trending

Tracking and trending efforts by providers, MCOs and DIDD shall include determining which reportable events are critical incidents.

A reportable event is classified as a critical incident when there is a determination that the ECF CHOICES provider and/or MCO could have and should have done something differently in order to prevent the critical incident or reduce the negative consequences of that incident on the member and others involved.

Tracking and trending (cont.)

For critical incidents, it is especially vital to evaluate the nature, frequency and circumstances of these incidents in order to determine how to prevent or reduce similar occurrences in the future, whenever possible. Such efforts may be targeted to an individual person supported, a particular service setting or location, a particular type of incident, and, including for the MCO, a particular provider or system-wide.

Tracking and trending (cont.)

- DIDD will maintain a statewide system for tracking and trending data for all Tier 1 and Tier 2 reportable events, including differentiating those events classified as critical incidents.
 - Trending may include the following views: system-wide, by program (HCBS waiver or ECF CHOICES), by provider type, by provider, by type of event and/or incident, by individual, or any other perspective determined to be beneficial for purposes of evaluation, remediation and system improvement.
 - All Tier 1 and Tier 2 reportable event and critical incident data shall be tracked and trended by DIDD on at least a quarterly basis.

Tracking and trending (cont.)

- Both the provider and the MCO shall be responsible for tracking and trending all Tier 3 reportable events, including differentiating those events classified as critical incidents.
- All Tier 1, Tier 2 and Tier 3 reportable events (including those classified as critical incidents) shall be tracked and trended by the MCO on at least a quarterly basis.
- All Tier 1, Tier 2, Tier 3 reportable events (including those classified as critical incidents) and nonreportable events shall be tracked and trended by the ECF CHOICES provider on at least a quarterly basis.
- Trending will include summation of the nature, frequency and circumstances of the events and incidents being tracked.
- MCOs, in collaboration with their providers, will evaluate the trended data and with regard to trended data for critical incidents in particular, will evaluate this data in order to determine how to prevent or reduce similar occurrences in the future.

**Events not reported by provider
staff or volunteers**

Events not reported by provider staff or volunteers

Consumer direction

- All Tier 1 and Tier 2 reportable events occurring during the provision of ECF CHOICES services or discovered or witnessed by a fiscal employer agent (FEA) employee must be reported to the DIDD and the MCO via data exchange and copied to the employer of record within the required time frame.

Natural supports

- All Tier 1 or Tier 2 reportable events reported to the DIDD or the MCO by: 1) member 2) caregiver, 3) family member or 4) citizen/friend and having occurred during the provision of ECF CHOICES services will be documented by DIDD or the MCO, as applicable.

Events not reported by provider staff or volunteers (cont.)

- The entity receiving the report (DIDD or MCO) will generate, within one business day, an *ECF Reportable Event Form* if the reported occurrence is confirmed to be a Tier 1 or Tier 2 reportable event.
- The entity receiving the report from the member or the member's natural support (either DIDD or MCO) will be responsible for submitting the completed *ECF Reportable Event Form* to the other entity.
- The provider's incident management coordinator or designee will be notified, via data exchange, of the reportable event by close of the next business day after the DIDD or MCO received the report from the member or the member's natural support.
- DIDD, the MCO and the provider will follow the process for investigations based on the tier the reportable event falls into.

Questions?



Contact information

- **Amerigroup email**
 - ECF-REF@amerigroup.com
- **Amerigroup fax**
 - 1-844-759-5952 (only if email is not available)
- **Adult Protective Services**
 - Phone: 1-888-277-8366
 - Fax: 1-866-294-3961
- **Child Protective Services**
 - Phone: 1-877-237-0004

Contact information (cont.)

- **DIDD email**
 - ECF.REF@tn.gov
- **DIDD fax**
 - 1-877-551-5591 (only if email is not available)
- **DIDD regional phone numbers** for reporting Tier 1 critical incidents and requesting exceptions to administrative leave
 - West Tennessee: 1-888-632-4490
 - Middle Tennessee: 1-888-633-1313
 - East Tennessee: 1-800-579-0023