



DIVISION OF DEVELOPMENTAL DISABILITIES  
Olympia, Washington

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TITLE: INCIDENT MANAGEMENT POLICY 12.01

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Authority: 42 CFR 483.13 and 483.420  
Chapters 26.44, 43.20A, 70.124, 71A, and 74.34 RCW  
Chapter 246-100 WAC - Communicable and Certain Other Diseases  
Chapter 246-101 WAC - Notifiable Conditions

Reference: DSHS Administrative Policy 2.08, Media Relations  
DSHS Administrative Policy 6.01, Allegations of Employee Criminal Activity  
DSHS Administrative Policy 8.02, Client Abuse  
DSHS Administrative Policy 9.01, Incident Reporting  
DSHS Administrative Policy 9.03, Administrative Review – Deaths of Residential Clients  
DSHS Personnel Policies 545 and 546  
DSHS Safety Program Manual  
DDD Policy 5.13, Protection from Abuse

**PURPOSE**

This policy provides guidelines for employees of the Division of Developmental Disabilities (DDD) for timely reporting of serious and emergent incidents. It also defines the responsibilities for investigation, resolution, correction, and prevention.

**SCOPE**

This policy applies to all DDD employees, contracted service providers, volunteers, interns, and work-study students. DDD certified contracted residential service providers and State Operated Living Alternatives (SOLA) program must follow the procedures and directions in DDD Policy 6.12, Residential Reporting Requirements.

**POLICY**

Each Field Services office and Residential Habilitation Center (RHC) must have comprehensive procedures for reporting and investigating serious and emergent incidents or situations. Each facility/program must report these incidents to make sure that the program

management/administration has the necessary information to investigate, analyze, provide support, correct, and take preventive measures. These procedures must include, at a minimum:

- A. Prompt and accurate reporting within the chain of command;
- B. Instructions on how to conduct thorough, confidential, and speedy investigations;
- C. Training of staff, especially supervisors, in reporting and investigation procedures;
- D. Assurance that plans of corrective action and prevention are in place, and that the investigation reaches closure in a timely manner;
- E. Tracking and regular analysis of incidents and trends to prevent reoccurrence; and
- F. Incorporating pertinent investigative findings into all administrative areas as necessary for quality assurance purposes.

### **PROCEDURES**

- A. The Regional Administrator or designee shall ensure the immediate reporting of serious and emergent incidents to DDD Central Office by telephone within one (1) hour of notification, accompanied by a summary of the incident, which is:
  - 1. Electronically transmitted through the DSHS-DDD Electronic Incident Data System within 24 hours or the next working day; **or**
  - 2. Telefaxed as recorded on DSHS Form 20-192, *Administrative Report of Incidents*, or an approved equivalent form, within 24 hours or the next working day.
  - 3. For reporting on weekends, holidays, and after hours, the Regional Administrator must notify the Central Office staff designated by the Division Director.
- B. The following information, if known, must be included in the initial report:
  - 1. Nature of the incident, including as complete an account of events as possible;
  - 2. Name(s) of person(s) involved in the incident;
  - 3. Names of any witnesses present;

4. Name of person making the report;
  5. Date and time of occurrence (if unknown, report the approximate date and time of occurrence);
  6. Location of incident;
  7. Nature and extent of any injuries or property damage;
  8. Client's ability to participate in the investigation;
  9. Description of actions taken, including actions taken to minimize danger, loss, damage, or destruction of evidence, and any actions taken to prevent further incident or recurrence; and
  10. Names of other persons or agencies that have been or will be contacted (e.g., AASA Adult Protective Services, AASA Complaint Resolution Unit, local law enforcement, parents, guardians, advocate, or medical examiner).
- C. Follow-up written reports shall be made appropriate to the nature of the incident and resultant investigation. The projected date for incident follow-up must be included in the written summary of the incident. For each serious and emergent incident, a final written report must be sent to DDD Central Office upon closure of the incident.
- D. The further specific notifications apply in the following cases:
1. **Death**  
  
Report all deaths immediately, within one (1) hour of notification, to DDD Central Office. Also report the death immediately to the person's parent and/or guardian and to county or city coroner's office and local law enforcement, as necessary. Conduct a review of all deaths according to the guidelines contained in DSHS Administrative Policy 9.03, *Administrative Review-Deaths of Residential Clients*.
  2. **Missing Client**  
  
Report to DDD Central Office if the missing person is not located within two (2) hours of notification, as a maximum, taking into account the history of the individual (e.g., one hour may be too long in the case of a Community Protection

Program participant). Ensure that the person's parent and/or guardian and local law enforcement are notified within the same time frame.

3. **Suspected Abuse, Neglect or Mistreatment**

Follow the procedures detailed in DDD Policy 5.13, *Protection from Abuse*. DDD Policy 5.13 requires a report to DDD Central Office within 24 hours.

4. **Suspected Criminal Activity**

Report within one (1) working day to DDD Central Office, local law enforcement, and the person's parent and/or guardian, if pertinent.

5. **Communicable Disease**

Report communicable diseases as required by WAC to the local health department, Washington State Department of Health (DOH), and DDD Central Office within the timelines specified in Chapter 246-101-101 WAC. A list of notifiable conditions and time frames is attached to this policy.

E. If employee misconduct is suspected, a Conduct Investigation Report (CIR) may be initiated per DSHS Personnel Policies 545 and 546. All personnel actions must be handled in accordance with DSHS Personnel Policies, Merit System Rules, and labor-management agreements.

1. Incident investigations shall be conducted in a professional manner. All investigations are considered confidential and shall be conducted with rights of representation.

2. Investigative reports, including interviews or statements of all witnesses, shall be confidentially maintained by the facility/program for an indefinite time.

3. Access to investigative reports must be limited to those persons designated by the Regional Administrator or Division Director.

F. Investigation summaries must include a plan to prevent further occurrences and/or diminish the risk of reoccurrence.

G. The Regional Administrator is responsible to ensure incidents of a serious and emergent nature are entered into the DSHS-DDD Electronic Incident Data System for purposes of

tracking and analysis. All reported incidents, follow-up reports, and investigations must be logged through entry in the DSHS-DDD Electronic Incident Data System, and monitored by the Division Director's designee for timely processing and closure at the regional level.

### **DEFINITIONS**

**Serious and emergent incidents** means any situations, events, or actions having occurred or occurring unexpectedly, resulting in serious physical or emotional harm, or potential harm, to clients, staff, visitors, or other persons; or resulting in major property damage; or violating local, state, and/or federal law or regulations.

Examples of serious and emergent incidents include, but are not limited to:

- Deaths;
- Life-threatening situations, including terminal illness;
- Alleged or suspected abuse, neglect or mistreatment of a client or others;
- Alleged or suspected sexual assault of a client or others;
- Physical assault requiring emergency medical care, hospitalization, and/or a report to law enforcement agencies;
- Injuries requiring emergency medical treatment or hospitalization associated with suspected abuse, neglect or significant injuries of unknown origin;
- Serious injuries of known cause (e.g., vehicle accident);
- Admission to a mental health/psychiatric facility;
- Major property destruction by a client;
- Alleged or suspected criminal activity by clients, staff, or others;

- Conditions presenting a substantial threat to the operations of DDD facilities, contracted agencies, or to the safety of clients. These conditions include, but are not limited to, fires, floods, bomb threats, and/or environmental hazards;
- Communicable diseases (defined in Chapter 246-101-010 WAC as diseases caused by an infectious agent which can be transmitted from one person, animal, or object to another person by direct or indirect means including transmission via an intermediate host or vector, food, water, or air);
- Clients missing for two (2) hours or less, at the discretion of the facility/program administrator; and
- Any other unusual, unexpected, suspicious, or atypical event or situation of special concern to DDD or other administrative areas within DSHS. This is most applicable if it may elicit a request for information or explanation from families, guardians, advocates, legislators or other state, federal, or local officials, other state agencies, the news media, or interested citizens.

**SUPERSESSSION**

DDD Policy 12.01  
Issued June 27, 1997

DDD Policy 12.01  
Issued December 1993

DDD Policy Directive 104  
Issued September 1991

DDD Policy Directive 310.5  
Issued February 1990

DDD Policy Directive 310.2  
Issued November 1986

Approved:     /s/ Linda Rolfe      
Director, Division of Developmental Disabilities

Date:     1/17/2002