INDEPENDENT LIVING, INC. (ILI)

Incident Management Policy and Procedure

PURPOSE: The purpose for reporting, investigating, reviewing, correcting and monitoring certain events or situations are to enhance the quality of care and services provided to consumers at Independent Living, Inc., and to ensure their safety and physical and emotional wellbeing.

The primary function of the reporting of certain events or situations is to enable administrators and managers to become aware of problems, to take corrective measures and to minimize the potential for recurrence of the same or similar events or situations. The prompt reporting of alleged consumer/student abuse could ensure that immediate steps are taken to protect other consumers/participants from being exposed to the same or similar risk.

The reporting of certain events or situations in an orderly and uniform manner facilitates identification of trends, which ultimately allows for the development and implementation of preventative strategies.

INCIDENT REVIEW COMMITTEE: An agency-wide standing committee consisting of, at least, six (6) individuals, including Administrative staff, Management staff, Direct Care staff, one (1) parent of a service recipient, one (1) service recipient and, at least one (1) member of the Board of Directors shall review and monitor recordable Incidents, Serious Reportable Incidents, and Allegations of Abuse to Persons Receiving Services from Independent Living, Inc. The Executive Director shall not serve as a member of the Committee, but may be consulted by the Committee in its deliberations.

Any committee member who recognizes a potential conflict of interest in his or her assignment shall report this information to the committee and recuse him/herself from participating in the committee review of the incident or occurrence in question.

The Committee shall meet on, at least, a quarterly schedule and, for more demand responsive situations, will meet **within thirty (30) days** of an incident classified as reportable or significant.

A standing Committee shall review internal reportable incidents, notable occurrences, minor notable occurrences, serious notable occurrences, significant incidents, and reportable incidents to:

a. Ensure that internal reportable incidents, notable occurrences, minor notable occurrences, serious notable occurrences, significant incidents, and reportable incidents were reported, managed investigated and documented consistent with the provisions of this policy and with Independent Living, Inc. policies and procedures and to make written recommendations to the appropriate staff and/or the administration of Independent Living, Inc., to correct, improve or eliminate inconsistencies.

- b. Ascertain that necessary and appropriate corrective, preventative, and/or disciplinary action has been taken to protect consumers receiving services from further harm and to safeguard against the recurrence of similar incidents, serious reportable incidents or alleged abuse and to make written recommendations in order to correct, improve or eliminate inconsistencies.
- c. Ascertain if further investigation or if additional corrective, preventative and/or disciplinary action is necessary, and if so, to make appropriate written recommendations to the Executive Director relative to the recordable incidents, reportable incidents, significant incidents, serious notable occurrences, and minor notable occurrences
- d. Identify trends in recordable incidents, reportable incidents, significant incidents, serious notable occurrences, and minor notable occurrences (e.g. by type, person, and/or allegations of abuse, site, employee/volunteer involvement, times, date, circumstances, etc.) and to recommend appropriate corrective, preventive, and/or disciplinary action to the Executive Director in order to safeguard against such recurring situations of recordable incidents, reportable incidents, significant incidents, serious notable occurrences, and minor notable occurrences
- e. Ascertain and ensure the adequacy of Independent Living, Inc. reporting and review practices, including the monitoring of the implementation of approved recommendations for corrective and preventive action.

All reportable incidents, significant incidents, serious notable occurrences, and minor notable occurrences shall be reported to New York State Office of People with Developmental Disabilities (NYSOPWDD), based on their specific reporting criteria and time frames.

INCIDENT REVIEW SCHEDULE:

- First Quarter Review (January 1 March 31) on or before April 30th
- Second Quarter Review (April 1 June 30) on or before July 31st
- Third Quarter Review (July 1 September 30) on or before October 31st
- Fourth Quarter Review (October 1 December 31) on or before January 31st