

# Elizabeth Richardson Center Critical Incident Procedures

## Critical Incident Sentinel Event Procedures & Critical Incident Team

### Purpose

To respond to sentinel events and critical incidents occurring outside of the normal course of routine business activities.

### Scope

- This procedure applies to all employees, volunteers, interns and anyone else involved in providing direct support to individuals receiving services at ERC.
- All ERC employees, volunteers and interns will be expected to comply with this procedure.

### Definitions

1. **Sentinel event** - A sentinel event is an unexpected occurrence involving death or serious physical or psychological injury of any ERC individual(s) served, staff, volunteers/interns, visitors and/or ERC property or program.
  - a. The following are examples of sentinel events. They include but are not limited to:
    - i. Death of any individual(s) served or staff
    - ii. Life threatening injury or illness of any individual(s) served or staff requiring outside medical attention
    - iii. Medication error that results in life threatening harm to any individual(s) served.
    - iv. Natural disaster that threatens life or property (e.g., flood, tornado, ice storm, etc.)
2. **Critical incident** - A critical incident is any act that threatens any ERC individual(s) served, staff, volunteers/interns, visitors, and/or includes any situation requiring swift, decisive action involving multiple components in response to and occurring outside of the normal course of routine business activities.
  - a. The following are examples of critical incidents occurring outside the normal course of routine business activities. They include but are not limited to:
    - i. Allegation of abuse and neglect;
    - ii. Elopement or wandering lasting more than five (5) minutes;
    - iii. Communicable disease biohazardous accidents, and infection control;
    - iv. Suicide or attempted suicide;
    - v. Injury requiring emergency medical care;
    - vi. Use and unauthorized possession of weapons;
    - vii. Vehicular accident involving personal injury;
    - viii. Unauthorized use and possession of legal and illegal substances;
    - ix. Violent or aggressive acts that are severe in nature and outside the normal course of behavioral management issues addressed by ERC staff;
    - x. Sexual assault;

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- xii. Any emergency or where police or fire department are called using 911.
3. The term "critical incident" when used in ERC's policies & procedures includes both sentinel events and critical incidents.

## Critical Incident team - Goals

1. To oversee ERC's response to critical incidents involving individuals served, staff, volunteers/interns, visitors, ERC property or programs;
2. To offer guidance, and appropriate support to individuals served, families and staff, and anyone else directly affected by the critical incident;
3. To review critical incidents situations, when appropriate, to prevent similar incidents from recurring.

## Critical Incident team – Membership

1. Team membership will include the Executive Director, Chief Operations Officer (COO), Director of Children's Services (DCS), Residential Director (RD) and the Director of Human Resources (DHR).
2. If deemed appropriate by the Critical Incident team, other staff may be invited to participate as part of the team.
3. The Executive Director or COO will chair the meeting.
  - a. In the absence of the Executive Director or COO, the DCS will chair the meeting.

## Response to a critical incident

1. Direct care staff and supervisors should take any immediate action to ensure the safety of individual served, staff and anyone else affected by the critical incident.
2. Supervisor should notify:
  - a. Appropriate Program Director (PD) or designee as soon as possible.
  - b. Appropriate Case Manager so they can fill out appropriate forms.
3. Appropriate PD will contact Executive Director, COO, or RD DCS as soon as reasonably possible.
4. At least two (2) members of the Critical Incident team will confer and determine if a meeting of the Critical Incident team is needed.
5. If needed, the team will meet within one (1) hour in person or via telephone conference call.
  - a. Executive Director, COO, DCS, RD, or DHR may call for a meeting at any time when they believe a critical incident has occurred that requires immediate attention.
  - b. Team will initiate an action plan.
  - c. If applicable, the Executive Director or designee will make contact with Board President and discuss appropriate channels and time frames to communicate critical incidents to ERC board members.

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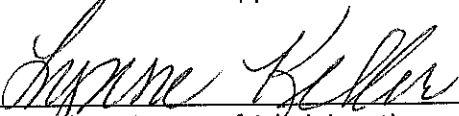
- d. Once the critical incident is resolved, the team will review all reports, complete findings of the event and make recommendations to resolve issues and minimize future occurrences.
- e. The Critical Incident team will submit a report at the next quarterly safety meeting and the safety committee will be charged with determining if additional safety procedures need to be implemented.

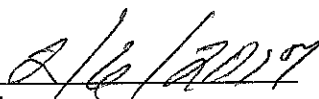
### Allegations of Abuse/Neglect against an ERC employee

1. Appropriate PD or designee is informed of allegation.
2. Appropriate PD or designee informs ED or COO and DHR.
3. If applicable, the Executive Director or designee will make contact with Board President and discuss appropriate channels and time frames to communicate incident to ERC board members.
4. DHR or designee suspends employee(s) until an internal investigation has been completed.
5. Within forty-eight (48) hours of notification, appropriate PD or designee completes the internal investigation that includes individuals served interviews, employee interviews and other witness statements to the incident.
6. Appropriate PD or designee completes reports:
  - a. On DDS or OLTC form
  - b. On Therap's General Event Record
  - c. Submits report(s) to licensing agency and ERC within reporting guidelines.
7. Appropriate PD or designee reviews investigation and forwards all pertinent documentations to the Critical Incident team.
8. The Critical Incident team will review all reports and make recommendations.
9. The Critical Incident team submits a report at the next quarterly safety meeting.

### Reviewed / Approved by

- Program Directors and COO reviewed and approved procedure on 4/2015.
- Organizational Health Committee reviewed and approved on 10/12/2015.
- Board of Directors reviewed and approved on 10/22/2015.
- Staff reviewed and revised procedures in 4/2015, 8/2016
- Staff reviewed procedures in 2/2017 – no revisions were made.
- Reviewed and approved:

  
Lynne Keller, Director of Administration

  
Date 2/6/2017

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