

Provider Training Series

Chapter 45, Section 20

Notification of Incident Process (Module #3)

Wyoming Department of Health
Division of Healthcare Financing
DD Waiver Provider Training Series



Welcome to the Division of Healthcare Financing (Division), Home and Community-Based Services (HCBS) Section Provider Training Series for Chapter 45 of the Department of Health's Medicaid Rules (Rules). These rules govern the home and community based Comprehensive and Supports Waivers, hereinafter referred to as the DD Waivers.

Chapter 45, Section 15(d) requires waiver providers to complete training in specific areas prior to delivering services. Individuals who complete all of the Series training modules and associated training summaries will be in compliance with this specific requirement. Please note that providers are responsible for ensuring they meet **all** training requirements, which are established throughout Chapter 45, prior to delivering waiver services.

This module covers Section 20, which addresses the notification of incident process.

Purpose of This Training



To familiarize providers with mandatory incident reporting requirements, provide information on how to report an incident, and establish the importance of using incident reporting data to improve provider processes and participant quality of life.

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Training Agenda

- ▶ Mandatory reporting requirements
- ▶ What, when, and to whom you should report
- ▶ How to complete and submit an incident report
- ▶ Required policies and procedures, including the review of internal incidents
- ▶ Reviewing incident reporting data to identify trends

By the end of the training module, the notification of incident process will have been reviewed and the following topics will have been introduced and explained:

- State laws regarding mandatory reporting;
- What to report, when to report, and to whom to report;
- How to complete an incident report using the Provider Portal;
- Required incident reporting policies and procedures, including the requirements for reviewing internal incidents; and
- The importance of reviewing and trending incident reporting data.

Please note that, for the purpose of these trainings, providers include provider staff members and case managers, unless there is a specific need to make a distinction.

Choice



Freedom to make choices is a human right. Laws protect people's right to decide how to spend their money, make their own health care decisions, work for a living, and have relationships with friends and family.

Even when addressing a topic like incident reporting, it is important to remember that home and community-based waiver services are based on the tenet that people have the freedom to make choices that impact their lives. Whether the choices are related to big decisions such as who provides their services, where they live, or what they want for their future, or small decisions such as with whom they spend time, what and when they eat, and how they spend their day, having choice is paramount to human dignity. Facilitating individual choice is a crucial part of being a DD Waiver provider.

Mandatory Reporting Requirements



W.S. 14-3-205 and W.S. 35-20-103 mandate that any person who suspects the abuse, neglect, or exploitation of a child or vulnerable adult is required to report.

According to Wyoming law, everyone must report the suspected abuse, neglect, or exploitation of children or vulnerable adults if they have reasonable cause to believe that it may be occurring.

Child or adult abuse, neglect or exploitation has no boundaries according to sexual orientation, ethnic background, age, religion, disability, or gender. The reporting of abuse, neglect, or exploitation of children and vulnerable adults is a 24-hour obligation. More information can be found on the Wyoming Department of Family Services website at <https://dfs.wyo.gov/i-need-to-report/abuse-neglect-exploitation/>.

What, When, and To Whom Should You Report?



Section 20 establishes the incidents that must be reported, when they must be reported, and to whom they must be reported.

Chapter 45. Section 20 establishes what incidents must be reported, by when they must be reported, and to whom. Failure to meet the criteria established in rule may result in corrective action that will require the provider to submit a plan to ensure that requirements are met in the future.

In many cases, incidents must be reported to entities outside of the Division, such as Protection and Advocacy Systems, Inc., the Department of Family Services, and law enforcement. The Division is responsible for assuring that Department of Health Medicaid Rules have been followed, but some incidents may require an investigation that would fall within the scope of one of the other identified agencies in order to ensure the safety of participants.

Incidents That Must Be Reported Immediately

Incident Categories:

- ▶ Suspected abuse and self-abuse;
- ▶ Suspected neglect and self neglect;
- ▶ Suspected abandonment and exploitation;
- ▶ Suspected intimidation;
- ▶ Suspected sexual abuse; and
- ▶ Death.

Report To:

- ▶ Division;
- ▶ Department of Family Services;
- ▶ Protection & Advocacy System, Inc.;
- ▶ Case manager;
- ▶ Legally authorized representative; and
- ▶ Law enforcement.

Chapter 45, Section 20(a)

Situations identified in Section 20(a) must be reported immediately after assuring the health and safety of participants and others who may be involved in the incident. These situations include:

- Suspected abuse and self-abuse;
- Suspected neglect and self neglect;
- Suspected abandonment and exploitation;
- Suspected intimidation;
- Suspected sexual abuse; and
- Death.

These incidents are considered critical, and must be reported to the Department of Family Services (DFS), Protection and Advocacy (P&A), the participant's case manager and legally authorized representative, and law enforcement, as well as the Division. In some instances, you will need to contact the other entities, such as DFS or law enforcement, before you notify the Division in order to assure the health or safety of the participant.

Incidents That Must Be Reported Within One (1) Business Day

Incident Categories:

- ▶ Police involvement;
- ▶ Restraint;
- ▶ Seclusion;
- ▶ Injuries caused by a restraint;
- ▶ Serious injury to participant;
- ▶ Elopement;
- ▶ Medication errors resulting in emergency medical attention; and
- ▶ Medical/behavioral admissions and ER visits.

Report To:

- ▶ Division;
- ▶ Protection & Advocacy System, Inc.;
- ▶ Case manager; and
- ▶ Legally authorized representative.

Chapter 45, Section 20(b)

Section 20(b) identifies incident categories that must be reported within one business day. These categories include:

- A participant's involvement with law enforcement;
- Any use of restraint, even if it is written into the participant's IPC;
- Seclusion;
- Injuries caused by a restraint;
- A serious injury to participant, which is defined in Wyoming Title 35-20-102 (a)(xv) as any harm, including disfigurement, impairment of any bodily organ, skin bruising, laceration, bleeding, burn, fracture or dislocation of any bone, subdural hematoma, malnutrition, dehydration or pressure sores.
- Elopement, which is defined in Chapter 45, Section 3;
- Medication errors resulting in emergency medical attention; and
- Medical or behavioral admissions and emergency room visits.

These incidents must be reported the Division, P&A, and the participant's case manager and legally authorized representative.

Medication Errors Must Be Reported Within Three (3) Business Days

Medication Errors:

- ▶ Wrong medication;
- ▶ Wrong dosage;
- ▶ Missed medication;
- ▶ Wrong participant;
- ▶ Wrong route; and
- ▶ Wrong time.

Report To:

- ▶ Division;
- ▶ Case manager; and
- ▶ Legally authorized representative.

Chapter 45, Section 20(c)

Section 20(c) identifies specific medication errors that must be reported to the Division, and the participant's case manager and legally authorized representative within three business days.

These errors include:

- The provider assisting with the wrong medication or dosage;
- The participant missing a medication as a result of provider error;
- The provider assisting the wrong participant with a medication;
- The provider delivering the medication through the wrong route, such as eye drops being administered as ear drops; and
- The provider delivering a medication at the wrong time, which is a deviation from the accepted standard time for the medication assistance.

Occasionally a participant may refuse to take a medication. This situation does not need to be reported to the Division, but the provider should track these refusals internally and address them with the prescribing professional and the participant's plan of care team if they become a regular occurrence.

Other Incidents That Must Be Reported

Any time a significant risk to a waiver participant's health and safety is identified, the provider shall report the situation to the Division.

Chapter 45, Section 20(d)



Although the list of incidents that is established in rule is comprehensive, there is always the possibility that a situation results in a health and safety concern that falls outside of the established categories. Any time a concern that could put the health or safety of the participant at significant risk is identified, including times when the participant is not in services, the provider is required to report the situation to the Division. These concerns may also be reported through the Division's on-line complaint form, found at <https://wyoimprov.com/complaintreport.aspx>.

Frequently Asked Questions - Do These Examples Count?

- ▶ Is self-harm a critical incident? What if the incident is something that is already covered in the IPC, such as a participant banging their head against the wall?
- ▶ Is a suicide attempt a critical incident?
- ▶ Is drug use an incident?

We'd like to address some of the more frequently asked questions that the Division receives regarding what is considered a reportable incident.

- Is self-harm a critical incident? What if the incident is something that is already covered in the IPC, like a participant banging their head against a wall?
 - In some instances when a participant hurts themselves, an incident report will need to be submitted. Just because a participant's behavior is listed the IPC does not mean it is not an incident.
 - Look at the statutory definitions of injuries. If the incident did not result in a serious injury, then it would not need to be reported; however, if the self-harm resulted in the need for medical attention, then an incident report should be submitted.
 - Even if the incident is not reportable to the Division, providers should document the event as an internal incident or through some other behavior tracking mechanism.
- Is a suicide attempt a critical incident?
 - Yes. Attempted suicide must always be reported as self-abuse.
- Is drug use an incident?
 - The short answer to this question is...sometimes.
 - Police involvement is an incident. Unsafe behaviors that cause injuries while intoxicated are incidents.

- You may want to contact your local DFS office to discuss the incident and determine if it rises to the level of self-abuse.

Frequently Asked Questions - Who Should Report Incidents?

- ▶ Are case managers required to report incidents?
- ▶ Who else is required to report an incident?
- ▶ I reported the incident to my boss. Does that count as reporting the incident?

The Division has also received several questions regarding who is responsible for reporting incidents. Although state statute is very clear that all citizens have an obligation to report critical incidents such as abuse, neglect, and exploitation of children and vulnerable adults, there are other incident reporting categories that don't rise to the level of a critical incident. So who is responsible for reporting those incidents?

- Are case managers required to report incidents?
 - Yes. Case managers are required by law to report incidents.
 - Case managers should make sure that a provider has reported an incident when appropriate, as providers usually have first-hand knowledge of the incident. However, case managers should file additional information about the incident, if necessary.
 - If, during the review of a participant's monthly documentation, the case manager discovers a situation that should have been reported but was not, they are required to submit a report.
- Who else is required to report an incident?
 - Providers and provider staff are required to report incidents. The public may also report incidents.
- I reported the incident to my boss. Does that count as reporting the incident?
 - Not necessarily. All provider staff members must know how to report an incident through the Division portal. Providers may designate one individual to

- file incidents, but all incidents must be reported.
- Staff members should always follow up and verify that the report was filed.

Completing and Submitting Incident Reports

DD Critical Incidents and Complaints

To report a Developmental Disabilities Waiver critical incident, click [here](#) for the Provider Portal.

To report a critical incident involving a participant who is receiving participant-directed Developmental Disabilities Waiver services, click [here](#).

To report a Developmental Disabilities Waiver complaint, click [here](#).

Providers are required to utilize the Provider Portal to submit incident reports to the Division.

Providers are required to use the Provider Portal to submit incident reports to the Division. This is the same portal that providers use to initially certify as a provider, conduct certification renewal activities, and manage corrective action plans. Providers need to remember that in all situations, assuring the health and safety of the participant is the first priority, so entities such as law enforcement or the Department of Family Services may need to be contacted before an incident report is submitted.

The Division has created a guidance document to help providers navigate the incident reporting process. It can be found on the [homepage](#) of the Division website. If you have questions or need more information on the incident reporting process, you can contact your area [Incident Management Specialist](#) (IMS). If you experience technical difficulties, such as error messages or login problems, please contact the Provider Portal helpdesk at providerportal@gannettpeaktech.com.

Completing Incident Reports - Step 1

- ▶ Access the incident reporting portal.
 - ▶ Division website
 - ▶ (<https://health.wyo.gov/healthcarefin/hcbs/>)
 - ▶ Select "To Report an Incident, Click Here"
 - ▶ Directly to portal
 - ▶ <https://www.wyoproviderportal.com/Login.aspx>

To report an incident, you must access the Provider Portal. You can go directly to the portal, or you can find the link on the homepage of the Division website. Both links are included in the slide.

If you cannot access the Provider Portal, call or email the area IMS to file a timely report. All other required notifications must be made within the established timeframes as well. In these circumstances, please be sure to keep documentation that demonstrates that you reported the incident in accordance with the requirements of Chapter 45.

Completing Incident Reports - Step 2

The screenshot displays the 'Provider Portal' interface. On the left is a vertical navigation menu with options: 'Task List', 'MHSA Provider Change Request', and 'Incidents'. A pink arrow points to the 'Incidents' option. The main content area has a top bar with a 'Report a New Incident' button, also highlighted by a pink arrow. Below this, there are two sections: 'Open Incident Submissions' and 'Closed Incident Submissions'. Each section contains a message box stating 'No open incident submissions found' and 'No closed incident submissions found' respectively. The footer of the page reads '© 2021 - Provider Portal'.

Once you enter the Provider Portal, select *Incidents* on the left side Navigation menu. This will open up a new window that lists the provider's open and closed incidents. Select *Report a New Incident* at the top of the window. If for any reason you need to leave the report before it is completed, please be sure to scroll down to the bottom of the page and select *Save Incident* to ensure that your work is not lost.

Completing Incident Reports - Step 3

Portal Current Role: Provider User Agreement Change Password Logout

Incident Submission

Wyoming Waivers Provider
State of Wyoming Department of Health

Participant

First Name: Last Name:
 DOB: Last Four SSN: Medicaid ID:

© 2021 - Provider Portal

In order to file an incident report you will need to search for the participant who involved. Enter the first and last name of the participant, as well as one additional data point to locate the participant. Additional data points include:


- The participant's date of birth;
- The last four digits of the participant's Social Security Number (SSN); or
- The participant's Medicaid ID.

Once you enter the information, select *Search for Participant*. The system will display the services that the participant is currently receiving from the provider. Click on the *Select* icon that is located next to the service related to the incident.

Completing Incident Reports - Step 4

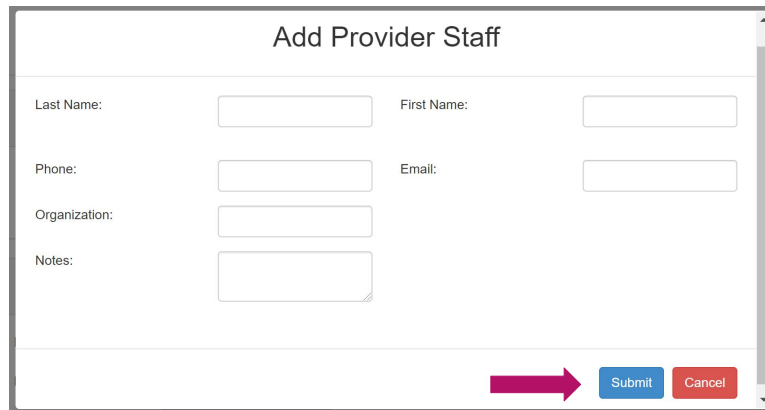
Participant			
Service: T2016U7			

Reporter Information			
First Name:	<input type="text"/>	Last Name:	<input type="text"/>
Phone:	<input type="text"/>	Email:	<input type="text"/>
Organization:	<input type="text"/>		
Relationship to Participant:	<input type="text" value="Service Provider"/>		
Primary Address County:	<input type="text" value="ALBANY"/>		



A new incident report will open. The information on the individual who is completing the report will automatically populate. You will need to select your relationship to the participant.

Completing Incident Reports - Step 5



The screenshot shows a web form titled "Add Provider Staff". It contains five input fields: "Last Name:", "First Name:", "Phone:", "Email:", and "Organization:". Below these is a larger text area labeled "Notes:". At the bottom right of the form are two buttons: "Submit" (blue) and "Cancel" (red). A red arrow points to the "Submit" button.

Enter the name, phone number, email address, and provider organization of all staff members who were involved in the incident. Include any information that the staff can provide related to the specific incident under the Notes section. Select *Submit* to add, and follow the process for each additional staff member who needs to be added.

Completing Incident Reports - Step 6

<input type="checkbox"/>	Suspected Abuse	ABUSE is defined as intentionally or recklessly inflicting physical or mental injury, unreasonable confinement, intimidation, cruel punishment and may include sexual offenses.
<input type="checkbox"/>	Suspected Self Abuse	SELF ABUSE is characterized as abuse (Intentionally or recklessly inflicting physical or mental injury, unreasonable confinement, intimidation, cruel punishment and may include sexual offenses) inflicted by self.
<input type="checkbox"/>	Suspected Neglect	NEGLECT is defined as the act of depriving a vulnerable adult of the minimum food, shelter, clothing, supervision, physical and mental health care, and other care necessary to maintain life or health, or which may result in a life-threatening situation.
<input type="checkbox"/>	Suspected Self Neglect	SELF-NEGLECT is when a vulnerable adult is unable, due to physical or mental disability, or refuses to perform essential self-care tasks, including providing essential food, clothing, shelter, or medical care, obtaining physical or mental health care, emotional well-being and general safety, or managing financial affairs.

You now need to select the incident type. If you aren't sure what the incident category entails, read the definition of each incident and select the incident type that reflects the situation.

More than one incident type may be selected. If there is more than one concern, you must select all of the categories that apply. Let's use the example of a participant going to the emergency room for a broken arm as a result of a staff member grabbing and yanking them from a chair. The participant went to the ER, which is a reportable incident. This injury would be considered serious, which is a reportable incident. Due to the staff member's treatment of the participant, this may be a situation of suspected abuse, which is a reportable incident.

In this example, the reporter should select an incident for a medical/behavioral admission, a serious injury, and suspected abuse.

Completing Incident Reports - Step 7

Incident Description	
Location description:	<input type="text"/>
Date:	<input type="text" value="mm/dd/yyyy"/> 
Time:	<input type="text" value="--:-- --"/> 
Description of incident:	<input type="text"/>
Chronology of events:	<input type="text"/>
Contributing factors:	<input type="text"/>

Describe the incident, including information on location, date and time, events, and contributing factors. When describing the incident, be sure to include strategies and techniques that staff used during the incident. Explain the incident as clearly as possible, using complete sentences and correct grammar.

- Document the location of the incident. If the incident occurred in multiple areas, include them. Be as specific as possible, including street addresses or identifying landmarks.
- Document the date and time the incident occurred - If the incident occurred over the course of time, enter the latest time and date.
- Provide a detailed description of what the incident looked like.
- Provide a chronology of events. Document a detailed explanation of the order of the incident, such as "this happened first, then this happened next" or "on June 1, 2021, at 11:45pm this happened, then on June 2, 2021 at 1:00am this happened."
- List contributing factors, providing detail of anything that may have exacerbated or escalated the situation leading up to and/or causing the incident to happen.

Use the following tips when completing this section of the incident report:

- Be specific - give dates, times, and who was involved. You should include the full names of other people who were involved.
- Be descriptive - provide as much information as you can in each of the boxes.

- Be accurate - provide facts that you can verify or that you specifically witnessed. Witnessing an incident can be very emotional, so it is important that you don't include opinions or judgements in your description of the incident.
- Use names and avoid pronouns - if there are three females involved in the incident, and you use *she* in your explanation, it is difficult to determine to which she you are referring. When using names, list the person's full name the first time it is used, and then the person's first name for all following referrals. If applicable, include the person's title (i.e., DSP). This applies to direct support professionals and participants.
- Proofread - read your report before you submit. If possible, have someone else knowledgeable of the incident read it as well. An incident report is a formal document, and needs to be understandable to everyone who reads it.

Completing Incident Reports - Step 8

Upload Documents (if applicable) :

Choose File

No file chosen

Upload

No documents have been uploaded for this Incident.

The system allows you to upload documents that are related to the incident, but they are not required. Supporting documents may include pictures, documentation from staff members, or participant or staff schedules. Please make sure that the documents that are uploaded are correct...no pictures of cats please!

Completing Incident Reports - Step 9

<input checked="" type="checkbox"/>	Referred to Protection and Advocacy
	Date: 06/22/2021
	Details: faxed report
<input type="checkbox"/>	Reported to Program Integrity Unit
<input type="checkbox"/>	Reported to Medicaid Fraud Control Unit
<input type="checkbox"/>	Other/not applicable
Description of action(s) taken: team meeting scheduled for 9am 6/24/2021	

The next section provides a list of actions that the provider may take. Please select all of the actions that apply, and describe the actions in the *Description of action taken* box. If you referred or reported the incident to an outside entity, such as law enforcement or Protection and Advocacy, you will be asked for additional detail. You will need to note the date the incident was reported or referred, and will need to provide detail related to how the incident was reported, anyone you spoke with, and other relevant details.

Remember, in accordance with Chapter 45, Section 20(a) of the Department of Health's Medicaid Rule, for incidents of abuse, neglect, and exploitation, entities must be contacted immediately after assuring the health and safety of the participant and other individuals. In most of these cases, law enforcement and DFS should be notified before the Division is notified.

Be sure to notify all entities within the timeframes established in rule. If notification occurs outside of these timeframes, please provide an explanation in the *Details* box.

Completing Incident Reports - Step 10

←

Status History

Current Status: Pending initial entry

Incident Status	Status Username	Status Date	Notes
Pending Initial Entry			

Notes:

Status: ←

Select the *Save Incident* button to submit the report. Once you complete and save the report, you will have the option to submit or cancel the incident report. Choose the desired option and select the *Update Status* button.

Completing Incident Reports - Step 11

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Current Status: State staff reviewing submission



Incident Status	Status Username	Status Date	Notes
Pending Initial Entry	theresa.cain	6/22/2021 1:15:48 PM	
Review Incident Submission	theresa.cain	6/22/2021 1:17:37 PM	Please provide information about location of incident
Request Additional Information	theresa.cain	6/22/2021 1:18:58 PM	here ya go
Review Incident Submission	theresa.cain	6/22/2021 1:18:58 PM	

If the Division determines that additional information is needed as part of the incident review or investigation, the incident will be returned to you. The incident will appear on your task list in the Provider Portal with the status of *Requesting additional information*. You can select the *View* icon to open the incident. The status history at the bottom of the report will provide details on the information being requested. You will then be able to upload documents or provide more detailed information in the description fields of the incident. Once you have entered the additional information, select *Submit Incident for Review* from the drop down menu and click *Update Status* to send it back to the Division for review. There is no limit in the number of times an incident can be rolled back to request more information.

Policies, Data Review, and Trend Analysis



Providers shall have incident reporting policies and procedures, shall maintain incident reports, and shall review data to identify trends.

Section 20 (e) requires providers to implement incident reporting policies and procedures that include the requirements of the Section. These policies and procedures must address both internal and external incident reporting.

Policy and Procedure Requirements

- ▶ Internal incident reporting requirements.
- ▶ Data review and trend analysis.
- ▶ Case manager access of internal incident data within five business days.
- ▶ Providers shall maintain internal incident reports for all incidents identified in Section 20.

Providers are required to have policies and procedures that address internal and external incident reporting. These policies and procedures should address the requirements of Section 20, as well as provider requirements that aren't specifically detailed in rule. These requirements should include:

- All reporting categories and requirements established in Section 20(a) - (d);
- Other incidents that provider staff are required to report internally, including to whom, by when, and how the incident should be reported;
- How and when information will be shared with case managers and legally authorized representatives;
- How often incidents will be reviewed to identify trends; and
- How information will be used to identify strategies to decrease incidents in the future.

Although there are policy and procedure requirements listed in Section 20, as well as other sections of Chapter 45, the purpose of policies and procedures is more than just meeting a requirement of rule. Policies and procedures are intended to make your business and the services you provide better. When providers develop and implement comprehensive policies and procedures, the provider defines a standard of behavior that everyone associated with the provider or organization must follow. This results in consistency of decision making, incident response, and overall service provision that ultimately benefits the provider and, more importantly, the participant.

The Division has provided template policies for internal and external incident reporting, which can be found on the [Forms and Document Library](#) page of the Division website, under the *Certification Forms* tab. Providers may use the examples as a starting point to develop policies that are specific to their circumstances. Providers are obligated to follow the policies that they adopt.

Providers should ensure that staff members receive training on how, when, and to whom they should report incidents, as well as the provider policies and procedures related to incident reporting.

Data Review

- ▶ Providers shall review internal incident data, including:
 - ▶ People involved;
 - ▶ Preceding events and follow-up conducted;
 - ▶ Causes of reoccurring critical incidents and other trends;
 - ▶ Actions taken to prevent similar incidents, and evaluation of those actions;
 - ▶ Education and training of personnel; and
 - ▶ Internal and external reporting requirements.

The regular review of incident reporting data is required. Section 20 states that the following data must be included in the review:

- People involved, including staff members;
- Preceding events, including the time of day and specific activities in which the participant was involved;
- Follow-up that was conducted, including any interventions that were used;
- Causes of reoccurring critical incidents and other trends;
- Actions taken to prevent similar incidents, and evaluation of those actions;
- Education and training of personnel; and
- Internal and external reporting requirements.

Case managers are expected to summarize all incident reports, including internal reports and those reported to the Division, in the Case Management Monthly Review.

Trend Analysis

- ▶ Providers should identify trends in order to determine changes that may be necessary for participants.
 - ▶ Common times of day or preceding incidents.
 - ▶ Specific staff members or other individuals.
 - ▶ Identified medical concerns or medication side effects.

It is important that data is reviewed, but it is helpful to understand why this review is so critical. In reviewing this information you may be able to identify the ultimate cause of the incident, which could prevent similar incidents from happening in the future. Maybe similar incidents always occur when a certain staff member works with the participant...this might be reason to make a change in staffing. Perhaps similar incidents always occur right before dinner. Would encouraging the participant to eat a small snack decrease the number of incidents?

Once you identify and implement strategies, it is necessary to review how they worked. If they were successful, it is important that this information be included in the IPC. It keeps the strategies from being forgotten over time, and they are more likely to be passed on as new staff members or providers are introduced into the participant's life.

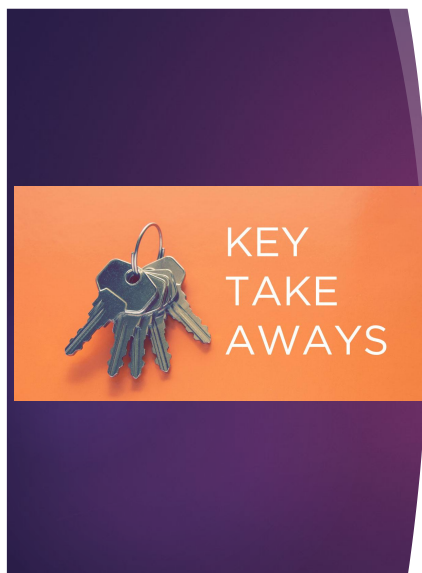
Sometimes strategies fail, but one failure doesn't necessarily mean the strategy won't work. Think through all of the components of the strategy, and try tweaking here and there. You tried offering a snack before dinner, but that didn't decrease the number or intensity of the incidents. You might want to look for other lessons you may have learned as well. Is dinnertime around a shift change? Are there types of snacks that did not work? Was the language used with the participant a potential trigger? Do other participants consistently come to the site around that time? Does the participant have a favorite television show or other activity at this time?

Even If the strategies fail, document what didn't work and go back to the drawing board to identify other potential strategies that might address ongoing concerns. There might be common threads that can help with crafting more successful strategies in the future.

Providers should not just accept that incidents are going to occur. They should always be looking for opportunities to decrease the number and severity of incidents in order to ultimately increase each participant's quality of life.

Providers are responsible for identifying the trends, but this trend information is critical for the whole plan of care team to have and review. It is imperative that a provider representative attends plan of care meetings and shares the trend analysis so the whole team is able to better understand the participant's behavior and what the participant is communicating.

Make sure to compile a document or report that demonstrates that you have conducted the trend analysis.



1. Providers are mandatory reporters and must meet specific incident reporting requirements.
2. Incident must be reported accurately and contain necessary information.
3. Providers are required to review incident reporting data.
4. Providers are required to use information to make changes that may ultimately increase each participant's quality of life.

Before you complete this training, we'd like to review some of the key takeaways:

1. Chapter 45, Section 20 establishes incident reporting requirements that providers must meet, including what, to whom, and when incidents should be reported. Providers are mandatory reporters...it's the law!
2. Providers must be specific, accurate, and descriptive when submitting incident reports so that there is a clear record of what happened and any follow up actions that the provider took.
3. The incident report is an important tool for documenting incidents and recording data related to those incidents. However, it is critical that providers review the data collected from these incidents in order to identify trends and potential areas of improvement.
4. Providers should always be looking for opportunities to decrease the number and severity of incidents. Once areas of improvement are identified, providers need to implement change and review the success of the changes. The goal is to make changes that result in fewer incidents, which may ultimately increase each participant's quality of life.

Questions???

Contact your Incident Management or Benefits and Eligibility Specialist

<https://health.wyo.gov/healthcarefin/hcbs/contacts-and-important-links/>

Thank you for participating this training. If you have questions related to the information in this training, please contact your Incident Management or Benefits and Eligibility Specialist. Contact information can be found by clicking on the link provided in the slide.

Please be sure to complete a summary of this training so that you can demonstrate that you received training on the notification of incident process.