**INTERNAL INCIDENT REPORTING POLICY AND PROCEDURE**

Provider Name

Disclaimer:  The Division of Healthcare Financing has provided the following policies as an example.  Providers may use this example as a starting point to develop policies that are specific to their circumstances.  Providers are obligated to follow the policies that they adopt.

**Internal Incident Reporting Policy**

If a participant experiences a minor incident that does not qualify as a reportable incident under the Comprehensive or Supports Waiver critical incident reporting criteria, **[PROVIDER NAME]** will document the event, notify the necessary parties, and analyze incident reporting data as described below.

**Internal Incident Reporting Procedure**

1. In addition to client-specific concerns, as determined by the need of individual teams, what non-critical incidents will routinely be reported (i.e., minor injury, escalating behavior)
2. People notified when an incident occurs (i.e., parent, primary provider)
3. Method of reporting, timeframes, and who is notified (i.e., phone call, secure message, case manager, Legally Authorized Representative, within how many days, etc)

1. Information that will be collected (i.e., preceding events, follow up conducted)
2. How data will be used to decrease similar incidents in the future (How often data will be analyzed, how action steps will be determined)

Agency Name (if applicable):

Printed name/Title:

Signature:

Date: