

Chapter:	Health and Safety		
Title:	Incidents Reporting		
Policy: ⊠ Procedure: □	Review Cycle: Triennial Author: Dir Op/Safety Off.	Adopted Date: 3.2024 Review Date: 3.2024	Related Policies:Legal & Regulatory ComplianceAgency PropertyAgency VehiclesEmergency PreparednessInfection Control and UniversalPrecautions

# <u>Purpose:</u>

Hopeful Horizons (HH) has adopted an incident reporting policy and related procedure to support the organization's health, safety and risk management monitoring and performance improvement efforts.

# Scope:

This policy applies to:

⊠ All HH Staff □ Selected HH Staff, as specified:

 $\Box$  HH Board Members  $\boxtimes$  HH Volunteers

⊠ Other: Students, Interns Service/Treatment Contractors

# Policy:

HH shall administer an incident reporting process to track unusual and critical incidents by type for risk management, liability and performance improvement purposes.

## A. <u>Roles and Responsibility:</u>

- 1. The Chief Executive Officer (CEO):
  - Recommend incident reporting policies
  - Receive and respond to routine reports of incident monitoring and use the same to inform strategic and/or performance improvement action
  - Apprise Board of Critical Incidents that have risk or financial management implications
  - With the Chief Development Officer (CDO), determine when a broader communication plan is required to address a critical incident
- 2. Director Of Operations (DO)/Safety Officer (SO):
  - Establish and administer the Incident Reporting process
  - Notify the CEO/designee of critical incidents as soon as possible, but no later than close of business the day of the incident
  - With CEO, determine when notice is required to insurance carriers related to property loss/damage, worker's compensation or other liability.
  - At the direction of the CEO, provide immediate notice to HHs' liability carrier upon notice of a party's intent to sue the organization
  - Monitor incidents for patterns and trends that may indicate an opportunity for improvement
  - With Human Resources and department leadership to support or arrange for post incident debriefing as indicated/needed
  - Take corrective action when indicated

- 3. Employees/Volunteers:
  - Report incidents in accordance with required policies and procedures
  - Take corrective action when indicated in accordance with HHs' policies and procedures
  - Participate in incident debriefing as indicated
  - Participate in incident related performance improvement initiatives
- B. <u>Notice and Timing Requirements:</u> The DO/SO shall be notified by phone of critical incidents as soon as the incident is stable/de-escalated, no later than the close of business the day of the incident. Incident reports shall be submitted to the DO/SO within 24-hours of the incident or the next business day.
- C. <u>Incident Reporting Process Management:</u> The DO/SO shall track incident types for patterns and trends that may inform process improvement activities.

## Communication and Training:

The Board shall receive a copy of the policy at the time of periodic review and will have an opportunity to ask clarifying questions during the approval process. Employees and volunteers shall receive notice of the Board's policy review and approval including notice of any substantive changes. The notice will provide a link to the policy located on the HH website.

New employees and volunteers shall review this procedure as part of their orientation.

#### **Definitions:**

- 1. Critical Incident: A situation or event that puts the health, safety or welfare of involved people at risk. The situation or event may include death of a client, serious injury, a major accident resulting in property damage, etc.
- 2. Unusual Incident: An event or situation that is not consistent with routine operations, policies, and procedures that could result in an undesired outcome but does not cause a risk to a person's health, safety or wellbeing.

#### **Other Related Materials:**

Agency Vehicles Use and Maintenance Emergency Incident Response Naloxone Administration and Storage Procedure Visitor Guest Building Entry

## **<u>References/Legal Authority:</u>**

NA

## Change Log:

Date of Change	Description of Change	Responsible Party	
03.2024	This is a new policy.	1 5 0	
		collaboration with J. Brown, DO/Safety Officer	
		DU/ Salety Officer	