

SDMI HCBS 305
Department of Public Health and Human Services
MENTAL HEALTH SERVICES BUREAU

SECTION

GENERAL PROGRAM ADMIN

SUBJECT

Serious Occurrence Report

The Addictive and Mental Disorders Division (Division) has established a system of reporting and monitoring serious incidents that involve individuals served by the Division in order to identify, manage and mitigate overall risk to the individual. Information obtained through this reporting system will assist the individual, family and provider agency in the development and implementation of the person's individual service plan and to assist the division in quality oversight, accountability and improvement efforts.

A "serious occurrence" means a significant event involving an individual, which affects the health, welfare or safety of the individual served under the circumstances listed below. Many of the individuals of SDMI waiver services are vulnerable to abuse or neglect. Law to report any instances or suspected instances of abuse or neglect to APS (ARM 52-3-811) mandates all persons employed by an agency participating in Home & Community Based Services. They are also required to complete a Serious Occurrence Report (SOR).

Circumstances Warranting a SOR

Following is a list of incidents necessitating a Serious Occurrence Report:

1. Suspected or known physical, emotional, sexual or verbal abuse;
2. Neglect of the individual, self-neglect or neglect by a paid caregiver;
3. Sexual harassment by an agency employee or individual;
4. Any injury that results in hospital emergency room or equivalent level of treatment. The injury may be either observed or discovered. A SOR would be required for any injury that occurred within the last 90 days;
5. An unsafe or unsanitary working or living environment which puts the worker and/or individual at risk;
6. Any event that is reported to Adult Protective Services, Child Protective Services, Law Enforcement, the Ombudsman Program or QAD/Licensing, Drug Utilization Review Board;
7. Referrals to the Medicaid Fraud Unit;
8. Psychiatric Emergency: Admission of an individual to a hospital or mental health facility for a psychiatric emergency;
9. Medication Emergency: When there is a discrepancy between what a physician prescribes and what an individual actually takes and these results in hospital emergency room or equivalent level of treatment or hospital admission;
10. Suicide resulting in death, suicide attempt or suicide threat;

PROCESS

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Appropriate submission of SORs is not optional - it is mandatory. All SORs must be entered into the Quality Assurance Management System (QAMS) database and submitted to the CPO and RPO (if SDMI/PAS) within 10 working days of the report of the incident .

The CPO will review the SOR and return it to the provider, with any responses, within 10 working days. The PAS/SDPAS/Home Health/Hospice provider completing the report will include the appropriate case management team as the secondary provider on the SOR. **The secondary provider must complete their section of the SOR within 10 days of receiving notice of the SOR submission.** All SORs need to be sent to Waiver Program Manager.

Who is Mandated to Complete a SOR

All providers of personal assistance services, home health services, hospice services, and HCBS case management teams are required to report an SOR. If you are unclear whether an incident constitutes an SOR, please contact your Community Program Officer for clarification. While an incident may not constitute a SOR, the event may impact an individual's health and safety and require supporting documentation and follow up by the agency and CPO.

It is the responsibility of the case management team to inform all Home and Community Services providers, other than those listed above, that any serious occurrence must be reported to the case management team, who will then complete the SOR.

PROVIDER RESPONSIBILITY

Serious occurrence reporting is a part of the Division's quality assurance system, which is designed in part to document individual health, welfare and safety issues and the service delivery system's response to those issues. Individuals may be involved in incidents that do not qualify as a reportable serious occurrence. Provider agencies are responsible for assessing the severity of the incident, reporting it as a serious occurrence, when necessary, and responding appropriately, regardless of circumstance. All providers are responsible for following up on incidents that involve individuals or affect the provider's ability to provide services. Injuries that do not warrant a serious occurrence report may require agency action and/or follow-up, which should be documented in the individual's chart. Community Program Officers should be contacted if there is any question regarding the necessary reporting and follow-up for an incident.

If a provider has concerns about another provider agency, they should inform the Community Program Officer.

