

APPENDIX N

Employer of Record Incident Reporting Materials

The NC Administrative Code requires Vaya Health (Vaya) to receive, review, and follow up on reports of Level II and Level III incidents that occur to a member who is receiving services from a contracted provider. This includes incidents that occur to a member who is receiving services provided under the Individual and Family Directed Services (IFDS) option. Incidents are reviewed to ensure that appropriate preventions and interventions are implemented for individuals in relation to serious occurrences.

Level I Incidents

Level I incidents are defined as any events that, in isolation, do not significantly threaten the health or safety of an individual, but could indicate systematic problems if they were to occur more frequently, or any incident that does not meet the criteria for a Level II or III. Level I incidents are to be documented and tracked internally by the Employer of Record (EOR) and available upon request by Vaya. Level I reports must be kept on file and given to the Vaya Incident Response Team if the employer is no longer participating in the IFDS option.

If a Level I Incident occurs, the EOR or Representative must:

- Attend to the health and safety of the individual
- Analyze the causes of the incidents
- Correct issues/processes that contributed to the incident
- Review incidents to identify/develop preventive measures for similar incidents
- Keep records about the analysis, corrective action and preventive measures taken

Backup staffing reports are required when failure to provide backup staff for Innovations participants occurs. EORs are required to submit backup staffing forms twice monthly; incidents occurring on the first through the 15th of the month are submitted on the last day of the month, while incidents occurring on the 16th through the end of the month are submitted on the 15th of the following month. All backup staffing forms must be submitted to backupstaffing@vayahealth.com.

Level II and III Incidents

Providers of publicly funded services licensed under N.C.G.S. Chapter 122C (Category A providers) as well as providers of publicly funded non-licensed periodic or community-based mental health, developmental disability, or substance use services (Category B providers) are required to report Level II and Level III incidents through the NC Incident Response Improvement System (IRIS) found at iris.ncdhhs.gov. EORs are considered to be Category B providers. EORs must submit the mandated report in IRIS within 72 hours of occurrence.

Restrictive Intervention

Restrictive intervention as defined in 10A NCAC 27C .0102 (b) (23) means an intervention procedure that presents a risk of mental or physical harm to the client and, therefore, requires additional safeguards. Such interventions include the emergency or planned use of seclusion, physical restraint (including the use of protective devices for the purpose or with the intent of controlling unacceptable behavior), isolation time-out, and any combination thereof.

Report any restrictive intervention that is:

- a. Used in an unplanned emergency (that is, not part of the individual's service plan)
- b. Planned but administered improperly or without proper authorization by staff without proper training or for longer than the authorized time
- c. Planned but resulting in discomfort, complaint, or injury requiring treatment by a licensed health professional

Please note the following:

- a. Type(s) of intervention: If more than one intervention is used, number in order of use.
- b. Appropriate administration: Answer "no" if the restrictive intervention is administered by a person without current training certification for more than the authorized time and/or in an unauthorized manner.
- c. Discomfort, complaint, or injury: If the individual requires treatment beyond first aid by a licensed health professional due to discomfort, complaint, or injury, or if anyone alleges abuse of the individual, answer "yes" in this section of the reporting form.

Level II incidents are those that involve a threat to a member's health and safety or a threat to the health or safety of others and deaths due to natural causes or terminal illness. If a Level II incident occurs, the EOR or Representative must:

- Report to law enforcement agencies, as needed.
- Submit the state-mandated Incident Reporting Form to the Vaya Incident Response Team within 72 hours of occurrence.
- Review incidents to identify/develop preventive measures for similar incidents.

Level III incidents are those that result in permanent physical or psychological impairment, draw media attention, or pose significant danger to the community. If a Level III incident occurs, the EOR or Representative must take the following steps within 24 hours:

- Notify the Vaya Incident Response Team, which will notify NCDHHS.
- Notify the member's assigned care manager/care coordinator to conduct a peer review of the incident. The review must begin within 24 hours of the Level III incident.
- If the Representative is reporting, the EOR must be notified.
- Notify law enforcement authorities.
- Secure the participant's record immediately following the incident.
- Make a copy of the participant's record.
- Send a copy of the record to the Incident Response Team when requested.

The Incident Response and Reporting Manual is located at: <https://www.ncdhhs.gov/document/iris-resources>. Instructions on how to complete the form are located on the same webpage.

If IRIS is unavailable, submissions may be faxed, emailed, or hand delivered to Vaya to meet timely filing requirements. In this instance, the provider is required to submit electronically as soon as available. Paper forms can be located at <https://www.ncdhhs.gov/document/incident-response-improvement-system-iris-forms>.

Vaya Incident Response Team fax: 828-398-4407

Vaya Incident Response Team email: IncidentReport@vayahealth.com