John Bel Edwards GOVERNOR



## State of Louisiana

Louisiana Department of Health Office for Citizens with Developmental Disabilities

MEMORANDUM OCDD-P-20-036

**DATE:** July 24, 2020

**TO:** Local Governing Entities Executive Directors

Local Governing Entities Developmental Disabilities Directors

**FROM:** Julie Foster Hagan, OCDD Assistant Secretary (

**SUBJECT:** Clarification of the OCDD Waiver Critical Incidents Closure Requirements

(Effective until September 30, 2020)

This notification to the LGE Developmental Disabilities (DD) Waiver Services Offices serves as updated clarification to the Office for Citizens with Developmental Disabilities' (OCDD) Operational Instruction F-8 Risk Management Process for Waiver Services: Critical Incident Reviews. The clarifications within this memorandum are effective retroactively to February 1, 2020 and will remain in effect until September 30, 2020.

The Critical Incident risk assessment process was developed to ensure that when repeated critical incidents occur the providers, support coordinators, and LGEs are able to appropriately remediate incidents that require more extensive actions. OCDD's Operational Instruction F-5(Critical Incident Reporting, Tracking, and Follow-Up Activities for Waiver Services) offers a framework for LGE Waiver Offices to review all critical incidents, provides a mechanism for the LGE Waiver medical certification specialists and LGE waiver managers to pursue additional remediation (by the support coordinators and direct services providers), and allows for proper documentation of all activities in the Statewide Incident Management Systems (SIMS).

LGE waiver managers may close SIMS critical incident cases that reach the threshold for Clinical Review Committee (CRC) referral. LGE waiver managers do not have to keep a SIMS critical incident open until recommendations from CRC are received. Cases that reach the threshold as established in Operational Instruction F-8 (Risk Management Process for Waiver Services: Critical Incident Review) must still be referred to CRC, and must include documentation of all remediation efforts by:

• the direct service provider (if that is an approved service),

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- the participant and participant's natural supports or self-directed services,
- the support coordinator, any other services provided by the participant's approved OCDD waiver agreement, and
- the LGE waiver office.

This documentation may include, but is not limited to:

- evidence of team meetings with the participant,
- referrals for medical or allied health assessment and treatment plans,
- referrals for mental health intervention, and
- skill-building activities for the participant or service providers.

LGE waiver managers may grant extensions to keep a critical incident open in order to assure all remediation has been completed based on the LGE waiver managers' judgment.