

Critical incident occurs (*no* suspected abuse, neglect, exploitation, or extortion):

- STEP 1:** When SC discovers a CI, contact the DSP **within 2 hours of discovery** to inform them and collaborate with the DSP to ensure that the participant is protected from further harm and that emergency actions are taken.

- STEP 2:** In the following circumstances, enter CI into SIMS ASAP upon discovery, but **no later than 48 hours** after the CI's discovery; provide all applicable descriptive information regarding the CI:
 1. Participant is linked to Supports Waiver or uses self-direction
 2. Participant is approved for HCBS waiver services, but is not using services through a DSPA
 3. DSPA is unable to enter CI into SIMS for legitimate reasons
 4. When SC is first to discover an incident (e.g. during a monthly contact). NOTE: If DSPA staff was on duty at the time of the CI, then DSPA is responsible for entering the CIR into SIMS. A "second" discovery by SCA later does not shift responsibility.

- STEP 3:** Enter follow-up case notes **within 6 business days** after receiving the initial CIR from the DSP or the SC's discovery of CI, and as needed until CIR closure.

- STEP 4:** Continue to follow-up with DSP, the participant, and others **as necessary** to update the CIR in SIMS until the CIR is resolved and closed.

- STEP 5:** Convene support team meetings to resolve the CI, develop strategies to reduce future CIs to the participant, revise the participant's support plan to implement strategies, and assist in linking the participant to needed supports/services.

- STEP 6:** When the CI requires CIRC review, submit required documentation to the LGE for its review and submission to the CIRC.

- STEP 7:** Send the participant the CIR's Participant Summary Report **within 15 days** of CIR closure by the LGE. When the CI is a death, send the Participant Summary Report to the Medicaid-authorized representative or legal guardian.

- STEP 8:** **At each quarterly meeting** for each participant, review all CIs for participant, analyze them for related previous CIs or trends, and facilitate discussion with the support team to identify any additional supports/services needed.

NOTE: SCAs should review SIMS daily for new CIRs and/or to follow-up on existing CIRs.

ACRONYMS:	<ul style="list-style-type: none"> • CI: critical incident • CIR: critical incident report • DSP: direct service provider • DSPA: direct service provider agency • SC: support coordinator • SCA: support coordination agency • SIMS: Statewide Incident Management System 	<ul style="list-style-type: none"> • ICF/DD: intermediate care facilities for individuals with developmental disabilities • APS: Adult Protective Services • CPS: Child Protective Services • EPS: Elderly Protective Services • HSS: Health Standards Section • CIRC: Critical Incident Review Committee
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SC witnesses or discovers suspected abuse, neglect, exploitation, or extortion:

STEP 1: **Take immediate action** to ensure the participant is safe from further harm and respond to their emergency needs.

STEP 2: Contact the DSP **within 2 hours of discovery** to inform them of the CI, and collaborate with the DSP to ensure that the participant is protected from further harm and that emergency actions are taken.

If the abuse, neglect, exploitation, or extortion involves...

STEP 3:

<ul style="list-style-type: none"> • Child (birth to 17): immediately report to CPS (1-855-452-5437) and local law enforcement. Enter into SIMS ASAP upon discovery, but no later than 48 hours after the CI's discovery and provide all applicable descriptive information regarding the CI. • Elderly (60 and older): immediately report to EPS (1-833-577-6532) and local law enforcement. Enter into SIMS ASAP, but no later than 48 hours after the CI's discovery and provide all applicable descriptive information regarding the CI. • Nursing homes and privately-owned ICF/DDs: immediately report to HSS (1-877-343-5179). 	<ul style="list-style-type: none"> • Adult (18 to 59): immediately report to APS (1-800-898-4910) and local law enforcement. Do not enter into SIMS. Instead of completing steps 4 – 9, obtain APS findings from LGE and collaborate with DSPA/DSP and LGE to complete any necessary follow-up and/or recommendations.
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STEP 4: Enter follow-up case notes **within 6 business days** after the SC's discovery of CI, and as needed until CIR closure.

STEP 5: Continue to follow-up with DSP, the participant, and others **as necessary** to update the CIR in SIMS until the CIR is resolved and closed.

STEP 6: Convene support team meetings to resolve the CI, develop strategies to reduce future CIs to the participant, revise the participant's support plan to implement strategies, and assist in linking the participant to needed supports/services.

STEP 7: When the CI requires review by the CIRC, submit to the LGE required documentation for the LGE's review and submission to the CIRC.

STEP 8: Send the participant the CIR's Participant Summary Report **within 15 days** of CIR closure by the LGE.

STEP 9: **At each quarterly meeting** for each participant, review all CIs for participant, analyze them for related previous CIs or trends, and facilitate discussion with the support team to identify any additional supports/services needed.

NOTE: SCAs should review SIMS daily for new CIRs and/or to follow-up on existing CIRs.