

Division of Developmental Disabilities

PROVIDER QUICK GUIDE FOR INCIDENT REPORTING

In the event of an emergency, FIRST CALL 9-1-1.

First and foremost take whatever actions are necessary to resolve the emergency and ensure health & safety.

INCIDENT TYPE	IMMEDIATE INCIDENT NOTIFICATION REQUIRED Call your designated District Reporting Number Submit a hard copy incident report NO LATER THAN the close of	NORMAL INCIDENT REPORTING PROCESS Submit hard copy of incident report by the close of the next business day via Email or Fax.
	business the next business day via Email or Fax.	
Abuse, Neglect and/or Exploitation NOTE: Requires mandatory reporting to law enforcement, Adult Protective Services (APS), Child Protective Services (CPS), or Tribal Social Services.	 ALL INSTANCES of physical and sexual abuse and/or exploitation OTHER TYPES OF ABUSE – report when an incident poses an immediate and serious threat toward an individual(s) enrolled with the Division SEVERE RISK of immediate death, serious impairment or disfigurement with immediate medical emergency and/or law enforcement intervention Newsworthy or widespread media coverage Emergency residential placement assistance needed 	 Incidents without serious physical injury or widespread media for the following: VERBAL/EMOTIONAL ABUSE PROGRAMMATIC ABUSE EXPLOITATION Emergency residential placement assistance is NOT needed
Accidental Injury or Injury of Unknown Origin	 SEVERE RISK of immediate death, serious impairment or disfigurement with immediate medical emergency and/or hospitalization necessary Newsworthy or widespread media coverage 	ALL OTHER INJURIES – whether or not medical intervention is required
Behavioral Events	 POSES AN IMMEDIATE AND SERIOUS THREAT directed toward self, others and/or individuals enrolled with the Division Community is at risk of harm Newsworthy or widespread media coverage 	OTHER BEHAVIORAL EVENTS — events that did not involve use of emergency measures/physical restraints and do not have a separate behavior data tracking process approved by the ISP team or designated in the behavior plan

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Community Complaint or Disturbance	 POSES AN IMMEDIATE AND SERIOUS THREAT directed toward self, others and/or individuals enrolled with the Division Community is at risk of harm Newsworthy or widespread media coverage 	All other community complaints or disturbances
Death	ALL DEATHS REQUIRE IMMEDIATE NOTIFICATION	NOT APPLICABLE: Immediate notification is required
Emergency Measures Note: Clearly identify the emergency physical intervention technique used and the responsible staff involved.	• SEVERE INJURIES related to the use of emergency physical intervention techniques (risk of immediate death, serious impairment or disfigurement with immediate medical intervention necessary)	All other uses of any emergency physical intervention technique
HIPAA Violation	 POSES AN IMMEDIATE AND SERIOUS THREAT directed toward individuals enrolled with the Division Community is at risk of harm Newsworthy or widespread media coverage 	All other HIPAA-related incidents or allegations
Hospitalization or Medical Attention by Emergency Personnel	• SUDDEN HOSPITALIZATION OR EMERGENCY ROOM/URGENT CARE VISIT WITH SEVERE CONSEQUENCES (risk of immediate death, serious impairment or disfigurement)	All other instances of hospitalization, urgent care or medical attention by emergency personnel

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Human Rights Violations	 POSES AN IMMEDIATE AND SERIOUS THREAT directed toward individuals enrolled with the Division Community is at risk of harm Newsworthy or widespread media coverage Emergency residential placement assistance needed 	All other allegations of human rights related incidents
Individual Missing	 Individual is STILL MISSING AND PRESUMED TO BE IN IMMINENT DANGER Media has been alerted HIGH RISK OF DANGER FACTORS: Community at Risk, Foster Care, Probation, Health Issues, No Safety Skills, Missed Critical Medication that may impact the health or safety of the individual. 	 Individual has been located and is currently safe Individual is still missing and has been determined to a LOW RISK for injury to self or others
Medication Error Note: Clearly identify the name of the medication and the staff responsible for the error.	HOSPITALIZATION REQUIRED DUE TO SEVERE PHYSICAL REACTION	All other medication errors
Medicaid Fraud	 POSES AN IMMEDIATE AND SERIOUS THREAT directed toward individuals enrolled with the Division Community is at risk of harm Newsworthy or widespread media coverage Emergency residential placement assistance needed 	All other allegations of Medicaid fraud

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Media Involvement	• EXTRAORDINARY EVENT involving an individual(s) enrolled with the Division, facility, or employees/contractor personnel that will be reported in the newspaper, television, radio, etc.	Any other media event involving an individual(s) enrolled with the Division, facility, or employees/contractor personnel
Provider or Individual Drug Use	 Widespread media coverage POSES AN IMMEDIATE AND SERIOUS THREAT directed toward self, others and/or individuals enrolled with the Division and is being reported to law enforcement due to possession or use Newsworthy or media coverage Requires need for emergency residential placement 	All other instances of provider or individual drug use
Suicide Attempt/ Threat	• SEVERE RISK if immediate death, serious impairment or disfigurement with immediate medical emergency intervention necessary	All other instances of suicide attempts/threats
Theft or Loss/Damage to Individual's Property	Theft or Loss/Damage of an individual's money or property THAT EXCEEDS \$1,000	Theft or Loss/Damage of an individual's money or property of \$1,000 OR LESS
Emergency Change of Operations	• ENVIRONMENTAL CIRCUMSTANCES, UNUSUAL WEATHER CONDITIONS, OR NATURAL DISASTERS WHICH RESULT IN AN EMERGENCY CHANGE OF OPERATIONS (e.g. fire, flood, windstorm, snow, loss of necessary utilities, etc.)	NOT APPLICABLE: IMMEDIATE NOTIFICATION ALWAYS REQUIRED (Phone Call Required for All Incidents)

The PROVIDER QUICK GUIDE FOR INCIDENT REPORTING is designed to assist with identifying incidents that may <u>require immediate notification</u> to the Division during or after business hours, weekends, and holidays. It is provided as a tool only and not intended to be all inclusive. Each incident is different which causes the outcome of the incident to vary from one circumstance and to the next. Please use this guide in conjunction with Division Policy Chapter 2100 related to incident reporting located at https://www.azdes.gov/main.aspx?menu=96&id=2844.

DIVISION OF DEVELOPMENTAL DISABILITIES STATEWIDE DISTRICT CONTACT DIRECTORY

DISTRICT CENTRAL

EMAIL

DDDCentralIR@azdes.gov

AFTER HOURS PHONE

602-375-1403 or 1-855-375-1403 TOLL FREE

NORMAL BUSINESS HOURS

Email, Fax or Phone to 602-375-1403 Option #2

FAX NUMBER

602-532-5511

DISTRICT EAST

EMAIL

DDDEastIR@azdes.gov

AFTER HOURS PHONE

602-375-1403 or 1-855-375-1403 TOLL FREE

NORMAL BUSINESS HOURS

Email, Fax or Phone to 602-375-1403 Option #1

FAX NUMBER

480-890-7138

DISTRICT WEST

EMAIL

DDDWestIR@azdes.gov

AFTER HOURS PHONE

602-375-1403 or 1-855-375-1403 TOLL FREE

NORMAL BUSINESS HOURS

Email, Fax or Phone to 602-375-1403 Option #3

FAX NUMBER

602-771-1857

DISTRICT NORTH

EMAIL

DDDDistrictNorthIncidentReports@azdes.gov

AFTER HOURS PHONE

928-773-2976 or 1-888-289-7177 TOLL FREE

NORMAL BUSINESS HOURS

Email, Fax or Phone to 928-773-2976

FAX NUMBER

928-773-8496

DISTRICT SOUTH

EMAIL

DDDD2IR@azdes.gov

AFTER HOURS PHONE

1-800-525-3611 TOLL FREE

NORMAL BUSINESS HOURS

Email, Fax or Phone to 520-628-6800

FAX NUMBER

520-628-6682

CPS/APS NOTIFICATIONS

CHILD PROTECTIVE SERVICES • CPS HOTLINE

1-888-767-2445 TOLL FREE

ADULT PROTECTIVE SERVICES • APS

1-877-767-2385 TOLL FREE

1-877-SOS-ADULT