

GENERAL DOCUMENTATION

LEGAL DOCUMENTS

- Certificate of incorporation/authority from the Secretary of State of Indiana.
- Verification of a tax identification number from the Internal Revenue Service.
- Verification of any assumed business names (DBAs), if applicable, from the Secretary of State of Indiana.
- Proof of Registration of any assumed business names (DBAs), if applicable, from office of the County Recorder for each county in which a place of business is located.
Contact the office of the Secretary of State at (317) 232-6576 for further information or clarification ([Secretary of State business link](#)).

FINANCIAL DOCUMENTATION (460 IAC 6-11-2 and 6-11-3)

- Current expenses and revenues.
- Projected budgets outlining future operations (i.e., projected future costs and income/staff and consumer growth).
- Proof that the entity can deliver services without interruption for at least two (2) consecutive months without payment.

INSURANCE COVERAGE (460 IAC 6-12-1 and 460 IAC 6-12-2)

Proof of insurance covering:

- Personal injury to an individual 460 IAC 6-12-2(1).
- Loss of life to an individual 460 IAC 6-12-2(2).
- Property damage to an individual 460 IAC 6-12-2(3).
- Documentation of Workers Compensation coverage according to IC 22-3-2, DDRS Policy: Insurance Requirements of Providers, eff. 2-28-11.

ORGANIZATIONAL CHART (460 IAC 6-10-6 & 6-16-2)

- A current organizational chart of agency, including parent and subsidiary corporations and/or (sub)contractors, if applicable.
- Identification of all familial relationships within the organizational chart. DDRS Policy: Provider Organizational Chart, eff. 2-28-11.
- List of all agency positions, including vacancies.

PROOF OF MANAGERIAL ABILITY (460 IAC 6-6-2)

All applications must include supplemental proof that the principal parties involved possess the managerial abilities to deliver requested services and to manage the business aspects of being a provider. The following must be submitted:

- Resumes.
- Diplomas/transcripts, if applicable (if the resume reflects a college degree, a copy of diploma and transcript must be included).
- Training experience/certifications/licensure.

DOCUMENTATION OF CRIMINAL HISTORIES (460 IAC 6-10-5; DDRS Policy: Personnel Records, eff. 2-2811)

Each of the provider's employee/agent files should have evidence that a criminal history search was obtained from every state (including the Indiana Central Repository) and county, wherever located, in which an owner, officer, director, employee, contractor, subcontractor or agent involved in the management, administration, or provision of services has resided and/or worked during the 3 years before the criminal history investigation was requested. DDRS Policy: Documentation of Criminal Histories eff. 2-21-10.

- A criminal background check that verifies that each employee/agent is free from felony convictions that include:
 - Sex crime;
 - Exploitation of an endangered adult;
 - Failure to report battery, neglect, or exploitation of an endangered adult;
 - Abuse or neglect of a child;
 - Murder;
 - Voluntary manslaughter;
 - Involuntary manslaughter;
 - Battery;
 - Offense related to a controlled substance;
 - Criminal conversion;
 - Criminal deviate conduct;
 - Offense related to alcohol or a controlled substance;
 - Theft, if the person's conviction for theft occurred less than ten (10) years before the person's employment application date, except as provided in IC 16-27-2-5(a)(5). 460 IAC 610-5(b)(1); DDRS Policy: Documentation of Criminal Histories eff. 2-21-10; DDRS Policy: Employment of Persons with Conviction of Prohibited Offenses or Non-Residency Status 2-21-11.
- Verification of professional registry searches for professionally licensed employees including the owner, officer, director, employee, contractor, subcontractor or agent that is free of citations for malpractice, malfeasance or other unprofessional actions. DDRS Policy: Documentation of Criminal Histories eff. 2-21-10 Excluded: Any employee/agent who does not possess a license (not required).
- Verification of lack of findings from nurse aide registry for any owner, director, officer, employee, contractor, subcontractor or agent performing any management, administrative or direct service to an individual. 460 IAC 6-10-5(d); DDRS Policy: Documentation of Criminal Histories eff. 2-21-10: the list where the individual's name should appear. Print the individual's name with an arrow to the location, then initial and date the print-out.

TRANSPORTATION (460 IAC 6-13-2).

Applicable if the provider and/or their employees or agents will transport the individual.

- Copy of a current driver's license for each employee/agent who transports individuals in a motor vehicle. 460 IAC 6-15-2(b)(6); Personnel Records, eff. 2-28-11
- For employees or agents who transport individuals in their personal automobiles: Proof of current automobile insurance. 460 IAC 6-15-2(b)(6); Personnel Records, eff. 2-28-11

- Evidence that all vehicles used by the provider to transport individuals are:
 - Maintained in good repair;
 - Properly registered with the Indiana Bureau of Motor Vehicles; and
 - Insured as required under Indiana law.
- Documentation of liability insurance for all vehicles owned or leased by the provider to transport individuals covering:
 - Personal injury;
 - Loss of life; and
 - Property damage.

PROOF OF NATIONAL ACCREDITATION (460 IAC 6-5)

Submit proof of accreditation by (or proof of a confirmed application along with an intent to survey, including date of survey and confirmation payment was made for future survey) from one of the following organizations:

- The Commission on Accreditation of Rehabilitation Facilities (CARF) or its successor.
- The Council on Quality and Leadership in Supports for People with Disabilities (CQL) or its successor.
- The Joint Commission on Accreditation of Healthcare Organizations (JACHO [*sic.*, JCAHO]) or its successor.
- The National Commission on Quality Assurance or its successor.
- The ISO-9001 Quality Management System.

Accredited CMCO must submit any and all accreditation documentation to BDDS, including but not limited to, accreditation status changes, intent to survey, application for accreditation, proof of accreditation decision, survey findings (including any quality improvement actions and corrective actions), annual quality report, and any sanction and termination decision.

CASE MANAGER QUALIFICATIONS

GENERAL QUALIFICATIONS (460 IAC 6-5 and 6-14)

- Verification that all staff are at least 18 years of age.
- A negative TB screening dated prior to the employee providing services for all employees/agents including administrative and clerical staff. 460 IAC 6-15-2(b)(1); Personnel Records, eff. 2-28-11:
Note: Most common documentation is a signed and dated statement from the health department or other entity authorized to screen for TB. Evidence of a negative chest x-ray is required for individuals with a positive skin test, followed by annual symptom screenings by a licensed medical professional. A health screening signed by a licensed medical professional is required in the case of pregnancy.
- For employees or agents that work with individuals, a record of current CPR certification by one of the following - 460 IAC 6-15-2(b)(2); 20; 091214_BQIS1214 CPR Policy Reminder
 - American Red Cross
 - American Heart Association

- National Safety Council
- American Health and Safety Institute, or the Emergency Care and Safety Council
- Case Management Organizations Staffing and Employment requirements - DDRS Policy: Personnel Records, eff. 2-28-11; Registered Nurse requirement announcement, eff. 6-27-17
 - Case Managers - maintain a sufficient number of qualified case managers with no more than the allowable caseload average in each county.
 - Compliance Officer - Retain at least one full-time employee to actively monitor and ensure all areas of compliance and quality.
 - Persons in this role may not carry a case load of more than 10 cases.
 - Persons in this role may not do quality and compliance reviews on their own caseload.
 - Registered Nurse – employ or contract with at least one full-time Registered Nurse who obtains/maintains valid Indiana licensure and who would be consulted on an as needed basis.

POLICY AND PROCEDURES

PROVIDER COMPLAINT PROCEDURE

The provider must have a written procedure for handling complaints from individuals receiving services that includes:

- Components for processing and decision making.
- Mandate for processing and decision making to occur within two (2) weeks of receiving the complaint; and
- Methods for informing individuals of the complaint procedure in writing, and in the individual's usual mode of communication. 460 IAC 6-8-3(4)(5).

PROHIBITING VIOLATIONS OF INDIVIDUAL RIGHTS

The provider must have a written policy and procedures that prohibit its employees/agents from violating individuals' rights (460 IAC 6-9), including:

- Abusing, neglecting, exploiting, and mistreating individuals 460 IAC 6-9-3(b)(1).
- Violating an individual's rights 460 IAC 6-9-3(b)(2).
- Corporal punishment which includes: Forced physical activity; hitting; pinching; the application of painful or noxious stimuli; the use of electric shock; the infliction of physical pain. 460 IAC 6-9-3(c)(1).
- Seclusion alone in an area from which exit is prohibited. 460 IAC 6-9-3(c)(2).
- Emotional/verbal abuse, including but not limited to communicating with words or actions in a person's presence with intent to: Cause the individual to be placed in fear of retaliation; Cause the individual to be placed in fear of confinement or restraint; Cause the individual to experience emotional distress or humiliation; Cause others to view the individual with hatred, contempt, disgrace or ridicule; or Cause the individual to react in a negative manner. 460 IAC 6-9-3(c)(3); DDRS Policy: Protection of Individual Rights, eff. 2-28-11.
- Written policies and procedures must include:
 - Conducting and participating in an investigation of an alleged violation of an individual's rights or reportable incident 460 IAC 6-9-4(k).
 - Reporting violations of the provider's policies and procedures to the provider 460 IAC 6-9-4(m).

- Investigating rights violations and incidents which includes immediate necessary steps to protect an individual who has been the victim of abuse, neglect, exploitation or mistreatment from further abuse, neglect exploitation or mistreatment 460 IAC 6-9-4(k).

HEALTH STATUS

The provider must have a written procedure for informing the individual of services and health status on a regular basis, as specified by the individual's PCISP, of:

- Medical condition 460 IAC 6-9-4(b)(1)
- Developmental status 460 IAC 6-9-4(b)(2)
- Risk of treatment 460 IAC 6-9-4(b)(3)
- Right to refuse treatment 460 IAC 6-9-4(b)(4)
- Behavioral status 460 IAC 6-9-4(b)(2)

INDIVIDUAL FREEDOMS

The provider must have a written protocol for ensuring individual's rights as outlined in 460 IAC and DDRS Policies to include:

- Ensure that an individual is free from unnecessary medication and restraints 460 IAC 6-9-4(c)
- Reduce an individual's dependence on medication and restraints 460 IAC 6-9-4(d); DDRS Policy Behavioral Support Plan eff. 2-21-11; DDRS Policy: Use of Restrictive Interventions, Including Restraint
- Has the opportunity for personal privacy 460 IAC 6-9-4(e);
- Is not compelled to provide services for a provider 460 IAC 6-9-4(f)(1);
- Who works voluntarily for a provider is compensated at the prevailing wage, and commensurate with the individual's abilities 460 IAC 6-9-4(f)(2);
- Has the opportunity to communicate, associate, and meet privately with persons of the individual's choosing 460 IAC 6-9-4(g)(1);
- Has the means to send and receive unopened mail 460 IAC 6-9-4(f)(2);
- Has access to a telephone with privacy for incoming and outgoing local and long distance calls at the individual's expense 460 IAC 6-9-4(f)(3);
- Has the right to retain and use appropriate personal possessions and clothing 460 IAC 6-9-4(i)
- Provide an individual with the opportunity to participate in social, religious and community activities 460 IAC 6-9-4(h)
- Protect an individual's funds and property from misuse or misappropriations 460 IAC 6-9-4(j)

PERSONNEL POLICY

The case management provider will have a written personnel policy that contains all required components (460 IAC 6-16-2; 6-16-3; 6-16-4). The provider will have a written policy/procedure that includes the following:

- Reviewed and updated as appropriate 460 IAC 6-16-2(a)(1); DDRS Policy: Personnel Policies and Manuals, eff. 2-28-11
- Distributed to employees and agents
- A procedure for conducting reference and employment checks. 460 IAC 6-16-2(b)(2)
- A prohibition against employing or contracting with a person who has been convicted of any of the following offenses (felony):
 - Sex crime;

- Battery;
- Neglect;
- Exploitation of an endangered adult or of a child;
- Failure to report battery, neglect, or exploitation of an endangered adult or of a child;
- Theft, if the conviction occurred less than 10 years before the person’s employment application date, except as provided in IC 16-27-2-5(a)(5);
- Criminal conversion;
- Criminal deviate conduct;
- Murder;
- Voluntary manslaughter;
- Involuntary manslaughter;
- Offense related to alcohol or a controlled substance.
- A prohibition against hiring people without verified United States residency status. DDRS Policy: Employment of Persons with Conviction of Prohibited Offenses or Non-Residency Status 2-21-11
- A process for evaluating the job performance of each employee and/or agent at the end of their training period and annually thereafter. 460 IAC 6-16-2(b)(4)
- A process for evaluating the job performance of each employee and/or agent that includes feedback from individuals receiving services from the employee and/or agent. 460 IAC 6-162(b)(4)
- A description of the work-related behavioral criteria used by the provider to initiate substance abuse screenings with its owners, directors, officers, employees, contractors, subcontractors or agents. DDRS Policy: Personnel Policies and Manuals, eff. 2-28-11
- Disciplinary procedures, that include:
 - A process for suspending staff following a report of, and during an investigation of alleged abuse, neglect, or exploitation
 - A description of grounds for disciplinary action against or dismissal of an employee or agent. 460 IAC 6-16-2(b)(5)(6)
- Safeguards that ensure compliance with HIPAA and all other Federal and State privacy laws. DDRS Policy: Personnel Policies and Manuals, eff. 2-28-11
- Written job description for each position that includes: 460 IAC 6-16-2(b)(1), DDRS Policy: Personnel Policies & Manuals, eff. 2-28-11
 - Minimum qualifications for the position;
 - Major duties required of the position;
 - Responsibilities of the employee in the position;
 - The name/title of the supervisor to whom the employee in the position must report;
 - Positions should match the positions noted on the organizational chart.
- Written Training Procedure: The provider shall have a written training procedure that is consistent with 460 IAC 6-14-3, and DDRS Policies, Including:
 - Reviewed and updated as appropriate 460 IAC 6-16-2(a)(1); DDRS Policy: Personnel Policies and Manuals, eff. 2-28-11
 - Distributed to employees and agents
 - Mandatory orientation for each new employee/agent to assure the employee/agents’ understanding of and compliance with the mission, goals, organization and applicability of 460 IAC Article 6. 460 IAC 6-16- 3(b)(1); DDRS Policy: Personnel Policies & Manuals, eff. 2-28-11

- Includes a system for documenting the training for each employee/agent including:
 - The topic of training provided;
 - The name and qualifications of the trainer;
 - The duration of the training (the time of day the training started and stopped);
 - The date or dates of training;
 - The signature of the trainer verifying satisfactory completion of the training by the owner, director, officer, employee, contractor, subcontractor or agent;
 - The signature of the owner, director, officer, employee, contractor, subcontractor or agent. 460 IAC 6-16-3(b)(2)(A); DDRS Policy: Personnel Policies and Manuals, eff. 2-2811
 - A system for ensuring that a trainer has sufficient expertise and knowledge of the subject to achieve the listed outcomes; and is certified or licensed when the training topic addresses services or interventions requiring certified or licensed practitioners for assessment, plan development, or monitoring. 460 IAC 6-16-3(b)(3); DDRS Policy: Personnel Policies and Manuals, eff. 2-28-11
- A Provider's owners, directors, officers, employees, contractors, subcontractors or agents performing any management, administrative or direct service to an individual on behalf of a Provider company shall receive initial and at minimum annual training in the protection of an Individual's rights, including:
 - Respecting the dignity of an individual;
 - Protecting an individual from Abuse, Neglect, and Exploitation; and
 - DDRS incident reporting, including: DDRS's current policy on incident reporting; the Provider's incident reporting policies and procedures.

EMERGENCY BEHAVIORAL SUPPORTS

The case management company will have a written policy/procedure that complies with 460 IAC and DDRS policies and includes facilitating the following within the Individualized Support Team when appropriate:

- Specific, defined emergency interventions to be used for behavioral emergencies;
- Identifying appropriately trained staff that is authorized to select and initiate an emergency intervention;
- Training needed for staff prior to implementing emergency interventions.
- Documentation that includes:
 - A description of the behavioral emergency;
 - A description of the emergency intervention implemented;
 - The person(s) implementing the emergency intervention;
 - The duration of the emergency intervention;
 - The individual's response to the emergency intervention.
- Convening of an IST meeting as soon as is possible, but no later than three (3) business days, following the behavioral emergency to discuss the behavioral emergency, the emergency intervention used, and the supports needed to minimize future behavioral emergencies.
- Identifying the following conditions that must exist for a restrictive intervention to be used without being planned:

- An unanticipated behavioral emergency is occurring;
An individual’s behavior poses an imminent threat of harm to self or others;
- There is no approved BSP for the individual that addresses the behavioral emergency, or there is an approved plan but it has been found to be ineffective and a more restrictive intervention is indicated based upon the individual’s behavioral emergency;
- The intervention chosen is determined to be the least restrictive measure required to quell the unanticipated behavioral emergency. DDRS Policy: Use of Restrictive Interventions, eff. 2-28-11
- Convening an IST meeting as soon as possible, but no later than two (2) business days following a behavioral emergency when a restrictive intervention was used. The purpose of this meeting is to plan supports to minimize any future necessity for emergency response, including but not limited to:
 - Conducting assessments or reassessments based upon any changes in the individual’s health or behavioral status;
 - Making environmental adjustments, as may be indicated;
 - Adding a behavioral support services provider to the IST, if indicated.
 - Developing or revising the individual's BSP, as may be indicated. DDRS Policy: Use of Restrictive Interventions, eff. 2-28-11

CONFLICTS OF INTEREST & ETHICS

A written conflict of interest and code of ethics policy that meets 460 IAC and DDRS requirements, and includes the following:

- Situations involving conflicts of interest by an owner, director, agent, employee, contractor, subcontractor or officer performing any management, administrative or direct service to an individual shall be avoided. DDRS Policy: Provider Conflict of Interest, eff. 2-28-11;
- Providers of case management services and their employees shall not provide any other service under 460 IAC 6 to that particular individual: 460 IAC 6-17-9.
- Require disclosure of possible conflicts of interest by all of the provider’s owners, directors, officers, employees, contractors, subcontractors or agents. DDRS Policy: Provider Conflict of Interest, eff. 2-28-11.
- The provider’s code of ethics requires all owners, directors, officers, employees, contractors, subcontractors or agents to:
 - Provide professional services with objectivity and respect for the unique needs and values of the individual being provided services;
 - Provide sufficient objective information to enable an individual, or the individual’s legal representative, to make informed decisions;
 - Avoid discrimination on the basis of factors that are irrelevant to the provision of services. DDRS Policy: Provider Code of Ethics, eff. 2-28-11
 - Accurately present professional qualifications;
 - Assume responsibility and accountability for personal competence in providing services;
 - Maintain professional licensure or accreditation;
 - Adhere to acceptable standards for the owner, director, officer, employee, contractor, subcontractor or agent’s area of professional practice;
 - Comply with all laws and regulations governing a licensed or accredited person’s profession;
 - Maintain the confidentiality of individual information consistent with the standards of IAC

- 460 and all other state and federal laws and regulations governing confidentiality of individual information;
- Conduct all practice with honesty, integrity, and fairness;
 - Fulfill professional commitments in good faith; and
 - Inform the public and colleagues of services by using factual information. DDRS Policy: Provider Code of Ethics, eff. 2-28-11
 - Make reasonable efforts to avoid bias in any kind of professional evaluation;
 - Not allow for nepotism during the conducting, directing, reviewing or other managerial activity of an investigation into an allegation of abuse or neglect, by prohibiting friends and relatives of an alleged perpetrator from engaging in these managerial activities. DDRS Policy: Provider Code of Ethics, eff. 2-28-11;
 - Notify the appropriate party of any unprofessional conduct that may jeopardize an individual's safety or influence the individual or individual's representative in any decision making process. DDRS Policy: Provider Code of Ethics, eff. 2-28-11.
- The provider's code of ethics must prohibit:
 - Advertising or marketing in a misleading manner;
 - Engaging in uninvited solicitation of potential individuals, who are vulnerable to undue influence, manipulation, or coercion. DDRS Policy: Provider Code of Ethics, eff. 2-28-11
 - The provider will produce a policy in compliance with IC 22-5-3-3 that will include protections for whistleblowers who report:
 - Allegations of abuse or neglect of an individual;
 - Violation of provider's policies and procedures;
 - Violation of DDRS policies and procedures; and
 - Violation of state and federal laws. DDRS Policy: Provider Code of Ethics, eff. 2-28-11
 - The case management provider will produce a policy that is consistent with 460 IAC 6-1-1 and includes:
 - Prohibitions against giving gifts to state employees, special state appointees, the spouse or un-emancipated child of an employee, the spouse or un-emancipated child of a special state appointee, an individual potentially receiving services from the provider, and any guardian or family member of an individual potentially receiving services from the provider.
 - Ethical safeguards and guidelines limiting the provision of gifts to an individual receiving service from the provider and any guardian or family member of an individual receiving service from the provider. DDRS Policy: Provider Code of Ethics, eff. 2-28-11

TRANSFER OF INDIVIDUAL'S RECORDS

The case management provider's policy regarding the transfer of an individual's records upon change of provider comply with the state's requirements as outlined in 460 IAC 6-9-6, and includes:

- The provider's written policy shall include:
 - Discuss with the individual the new provider's need to obtain a copy of the previous provider's records and files concerning the individual 460 IAC 6-9-6 (a)(1);
 - Provide the individual with a written form used to authorize the release of a copy of the records and files concerning the individual to the new provider 460 IAC 6-9-6 (a)(2); and
 - Require the current provider to request the individual to sign the release form 460 IAC 6-9-6 (a)(3)

- Forward a copy of all of the individual's records and files to the new provider no later than 7 days after receipt of the individual's signed written release. 460 IAC 6-9-6 (b)

TERMINATION OF SERVICES

The case management provider policy for providing notification of termination of services must meet 460 IAC 6-9-7 requirements, including:

- The provider's written policy shall include that the provider will:
 - Give an individual and an individual's representative at least 60 days written notice before terminating the individual's services if the services being provided to the individual are of an ongoing nature. 460 IAC 6-9-7 (a)
 - Participate in the development of a new or updated PCISP prior to terminating services. 460 IAC 6-9-7 (b)(1)
 - Continue providing services to the individual until a new provider providing similar services is in place. 460 IAC 6-9-7 (b)(2)

INDIVIDUAL PERSONAL FILE, PROVIDERS OFFICE

Providers must have a written policy outlining the requirements to analyze and update documentation:

- Case Management providers are required to document at least every 90 days. DDRS Policy: Maintenance of Records of Services Provided.

INCIDENT REPORTING

The case management provider must have a written policy that complies with 460 IAC and DDRS policies, which include:

- Reporting alleged, suspected or actual abuse, (which must also be reported to Adult Protective Services or Child Protective Services as indicated) which includes but is not limited to:
 - Physical abuse, including but not limited to: intentionally touching another person in a rude, insolent or angry manner; willful infliction of injury; unauthorized restraint or confinement resulting from physical or chemical intervention; rape.
 - Sexual abuse, including but not limited to: nonconsensual sexual activity; sexual molestation; sexual coercion; sexual exploitation.
 - Emotional/verbal abuse, including but not limited to communicating with words or actions in a person's presence with intent to: Cause the individual to be placed in fear of retaliation; Cause the individual to be placed in fear of confinement or restraint; Cause the individual to experience emotional distress or humiliation; Cause others to view the individual with hatred, contempt, disgrace or ridicule; Cause the individual to react in a negative manner.
 - Domestic abuse, including but not limited to: physical violence; sexual abuse; emotional/verbal abuse; intimidation; economic deprivation; threats of violence; from a spouse or cohabitant intimate partner.
- Reporting alleged, suspected or actual neglect (which must also be reported to Adult Protective Services or Child Protective Services, as indicated) which includes but is not limited to:
 - Failure to provide appropriate supervision, care, or training;
 - Failure to provide a safe, clean and sanitary environment;
 - Failure to provide food and medical services as needed;
 - Failure to provide medical supplies or safety equipment as indicated in the Person-Centered Individualized Support Plan (PCISP).

- Reporting alleged, suspected or actual exploitation (which must also be reported to Adult Protective Services or Child Protective Services as indicated) which includes but is not limited to:
 - Unauthorized use of the: personal services; personal property or finances; or personal identity of an individual;
 - Other instance of exploitation of an individual for one's own profit or advantage or for the profit or advantage of another.
- Reporting peer-to-peer aggression that results in significant injury by one individual receiving service, to another individual receiving services.
- Reporting death (which must also be reported to Adult Protective Services or Child Protective Services, as indicated). Additionally, if the death is a result of alleged criminal activity, the death must be reported to law enforcement.
- Reporting a service delivery site with a structural or environmental problem that jeopardizes or compromises the health or welfare of an individual.
- Reporting a fire at a service delivery site that jeopardizes or compromises the health or welfare of an individual.
- Reporting elopement of an individual that results in evasion of required supervision as described in the PCISP as necessary for the individual's health and welfare.
- Reporting a missing person when an individual wanders away and no one knows where they are.
- Reporting alleged, suspected or actual criminal activity by an individual receiving services or an employee, contractor or agent of a provider, when:
 - The individual's services or care are affected or potentially affected; The activity occurred at a service site or during service activities; or
 - The individual was present at the time of the activity, regardless of location.
- Reporting an emergency intervention for the individual resulting from:
 - A physical symptom;
 - A medical or psychiatric condition;
 - Any other event.
- Reporting any injury to an individual when the cause is unknown and the injury could be indicative of abuse, neglect or exploitation.
- Reporting any injury to an individual when the cause of the injury is unknown and the injury requires medical evaluation or treatment.
- Reporting a significant injury to an individual that includes but is not limited to:
 - A fracture;
 - A burn, including sunburn and scalding, greater than first degree;
 - Choking that requires intervention including but not limited to: Heimlich maneuver; finger sweep; or back blows;
 - Bruises or contusions larger than three inches in any direction, or a pattern of bruises or contusions regardless of size;
 - Lacerations which require more than basic first aid;
 - Any occurrence of skin breakdown related to a decubitus ulcer, regardless of severity;
 - Any injury requiring more than first aid;
 - Any puncture wound penetrating the skin, including human or animal bites;
 - Any pica ingestion requiring more than first aid;

- A fall resulting in injury, regardless of the severity of the injury.
- Reporting a medication error or medical treatment error as follows:
 - Wrong medication given;
 - Wrong medication dosage given;
 - Missed medication - not given;
 - Medication given wrong route; or
 - Medication error that jeopardizes an individual's health and welfare and requires medical attention.
- Reporting use of any aversive technique including but not limited to:
 - Seclusion (i.e. placing an individual alone in a room/area from which exit is prevented);
 - Painful or noxious stimuli;
 - Denial of a health related necessity;
 - Other aversive technique identified by DDRS policy.
- Reporting use of any PRN medication related to an individual's behavior.
- Reporting use of any physical or mechanical restraint regardless of:
 - Planning;
 - Human rights committee approval;
 - Informed consent.
- In response to an incident, Call 911 if indicated.
- In response to an incident, Initiate safety actions for the individual as is indicated and as is possible.
- Contact the following and notify them of the situation:
 - A manager within the responsible provider company;
 - The BDDS District Manager;
 - Adult Protective Services or Child Protective Services, as indicated; and
 - Individual's legal representative.
- File an incident report with BQIS using the DDRS approved electronic format available at <https://ddrprovider.fssa.in.gov/IFUR/> within 24 hours of initial discovery of a reportable incident. The initial incident report should include:
 - Comprehensive description of incident;
 - Description of circumstances and activities occurring immediately prior to incident;
 - Description of any injuries sustained during incident;
 - Description of both the immediate actions taken and actions planned but not yet implemented; and
 - Listing of each person involved in incident, with a description of the role and staff title, if applicable, of each person involved.
- Forward copy of electronically submitted incident report to the following people within 24 hours of initial discovery of a reportable incident:
 - APS or CPS (as indicated) for all incidents involving alleged, suspected or actual abuse, exploitation, or death;
 - The individual's BDDS service coordinator;
 - The individual's residential provider when receiving residential services;
 - The individual's case manager when receiving services funded by waiver;
 - All other service providers identified in the individual's Individualized Support Plan; and

- The individual’s legal representative, if indicated.

COLLABORATION AND QUALITY CONTROL

The provider will have a written policy that states its commitment to collaborating with individuals’ other providers as identified in 460 IAC 6-10-7 and DDRS related policies

- The provider's policy shall include:
 - Collaborate with the individual's other service providers to provide services to the individual consistent with the individual's PCISP. 460 IAC 6-10-7(a)
- If an individual dies, the Case Manager shall cooperate with the provider responsible for conducting an investigation into the individual's death. 460 IAC 6-25-9 460 IAC 6-10-7(g)

QUALITY MANAGEMENT AND QUALITY IMPROVEMENT

- An annual survey of individual satisfaction;
 - Maintain a record of findings from the annual individual satisfaction surveys;
 - Have documentation of efforts to improve service delivery in response to survey findings;
 - An assessment of the appropriateness and effectiveness of each outcome included in the Individual’s Person-Centered Individualized Support Plan (PCISP).
- A process for:
 - Reporting reportable incidents and necessary follow up