



# Informational Memo

## Incident Investigation Determination

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### ODP Communication Number: Memo 110-12

*The mission of the Office of Developmental Programs is to support Pennsylvanians with developmental disabilities to achieve greater independence, choice and opportunity in their lives.*

**AUDIENCE:** Administrative Entities (AEs)/Counties, Supports Coordination Organizations (SCOs), Public and Private Intermediate Care Facilities/Intellectual Disability (ICFs/ID), Direct Service Providers, and Contracted Entities that conduct investigations.

**PURPOSE:** Entities that report and investigate incidents have expressed confusion about making incident investigation determinations, which is the process of confirming or not confirming that an incident occurred. This informational memorandum provides guidance for making investigation determinations.

**DISCUSSION:** The incident management (IM) system allows providers, AEs, and ODP to track and manage allegations of adverse events experienced by the individuals we serve. We use this incident information for analysis and reporting, to develop evidence-based services, and to manage risk.

To achieve these goals, the IM system must provide, with accuracy, a count of alleged incidents and what portion investigators confirm based on a preponderance of evidence. When a provider, AE, or ODP staff creates a report of confirmed incidents, it is vital that the report is comprehensive and the user is sure that “confirmed” has a universal meaning.

### Correctly Categorizing an Incident

Incident investigation determination starts with correctly categorizing incidents. When entering the first section of an incident report, less than 24 hours has passed since the incident’s occurrence or discovery. At that point, the situation may not be clear, so the report may not indicate the correct primary and secondary categories. As the investigation unfolds, new information sometimes emerges, and another category may be more appropriate. The Verification of Time & Categorization screen in the final section of the HCSIS incident report

provides an opportunity to update the date, time, and incident category to reflect new information.

***EXAMPLE (part 1):*** *An individual went to the emergency room for treatment of an injury. Initially, it was unclear how the injury occurred, so the entity reported the incident as an Emergency Room Visit, Unexplained Injury. During the investigation, several people alleged that the injury resulted from a housemate deliberately knocking the individual down.*

*Based on the findings, the provider changed the secondary category to Injury Individual to Individual (I to I) on the Verification of Time & Categorization screen. The provider staff recognized that they were reporting and investigating an Emergency Room visit resulting from an injury caused by another individual.*

### Making the Investigation Determination Based on a Preponderance of Evidence

In addition to allowing updates to the incident category, the Verification of Time & Categorization screen also requires an investigation determination of confirmed, not confirmed, inconclusive, or N/A regarding the correctly stated incident category. To make the investigation determination, certified investigators use a “preponderance of evidence.” A preponderance of evidence is the greater weight of the evidence gathered during the investigation.

***EXAMPLE (part 2):*** *To confirm or not confirm the Emergency Room Visit, Injury I to I incident, the provider examined the investigatory findings. Because several people reported that the injury resulted from a housemate deliberately knocking the individual down, the weight of the evidence supported confirming the incident. A confirmed incident of Emergency Room Visit, Injury I to I was finalized in HCSIS.*

### Common Investigation Determination Errors

***Not confirmed*** - Consider Example (part 2). Had the secondary category remained “injury unexplained,” the investigator would have used the weight of the evidence to determine if an Emergency Room Visit occurred due to an unexplained injury. Because there were several witnesses that testified that another individual caused the injury, the evidence weighs against confirming an unexplained injury. However, not confirming an incident of Emergency Room Visit, Unexplained Injury gives the appearance that no Emergency Room Visit happened at all. This artificially decreases the number of confirmed Emergency Room Visits reported in HCSIS.

***Adding a second incident*** - Now revisit Example (part 1). A common strategy to resolve this issue is not confirming the incorrect category, but entering and confirming a second incident. In the example above, the investigator would not confirm Emergency Room Visit, unexplained injury. The provider would enter and confirm a second incident - Emergency Room Visit, Injury I to I. Taking this approach results in HCSIS reflecting two separate incidents when only one occurred, increasing the number of reported incidents.

**Inconclusive** - Another common resolution to category/finding conflicts is determining that the investigation was “inconclusive.” An inconclusive determination indicates that the evidence weighed neither for nor against the allegations, and that is rarely the case. Correct inconclusive determinations are rare because the weight of evidence generally leans more in one direction. In the example above, avoiding the conflict between the category and the findings by calling it “inconclusive” would be inaccurate. The investigation yielded a preponderance of evidence clearly allowing confirmation of the incident.

**N/A** – Investigators sometimes choose N/A to avoid making any determination; however, N/A is an appropriate determination only when the target is not an employee, a volunteer, or individual receiving services, as explained in the Incident Management Bulletin, Annex A § 6000.911(d).

Investigators sometimes use N/A as a determination in cases of death, ostensibly because death is so apparent that the investigator need not confirm it. However, unlike people, HCSIS is literal. Incidents not identified as “confirmed” will not appear on a list of confirmed incidents. To provide an accurate count of confirmed incidents, if a death occurred, then the investigator must confirm it. Selecting N/A omits deaths from reports of confirmed incidents and artificially suppresses the number of confirmed incidents.

**Abuse and neglect** – Investigators sometimes believe that the investigation determination confirms or does not confirm findings of abuse and/or neglect. That is not the case. However, accurately reporting findings of abuse and/or neglect discovered during the investigation is important. Therefore, after confirming that a category of incident occurred, indicate any findings of abuse and/or neglect in the drop-down selection provided on the Verification of Time and Categorization screen:

The screenshot shows a web form titled "Final Section: Verification of Time and Categorization". The form includes the following fields and options:

- Go to: Verification of Time and Categorization [Go]
- Based on the current information and investigation facts, revise the time and classification (if necessary).
- Incident Occurred or Recognized/Discovered Date (MM/DD/YYYY): 7/9/2012
- Incident Occurred or Recognized/Discovered Time (HH:MM AM/PM): 11:00 AM
- Primary Category of Incident: Death
- Secondary Category of Incident: Provider Operated Setting
- Was the incident caused by:  Choking  Falling  Neither
- Investigation Required**
- Certified Investigator: [Dropdown]
- CERTIFIED INVESTIGATOR SYSTEM ENTRY DATE (MM/DD/YYYY): 07/09/2012
- Investigation Information**
- Indicate investigation determinations: Confirmed
- As a result of the investigation, is this a case of founded abuse or neglect? [Dropdown]
- Has the family been notified of the outcome of the investigation? [Dropdown]
- Buttons: Reset, Save

A red arrow points to the dropdown menu for "As a result of the investigation, is this a case of founded abuse or neglect?", which has options: Abuse, Neglect, Both, and Neither.

**QUESTIONS:** Please direct questions regarding this Informational Memorandum to the ODP Risk Manager assigned to your region. Contact the Columbus Organization at [ODPInvestigations.com](http://ODPInvestigations.com) with questions related to conducting investigations and investigation certification.