

Policy Transmittal

Developmental Disabilities Services



Anna Lansky
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Number: DD-PT-23-028
Issue date: 06/15/2023

Topic: Developmental Disabilities

Due date:

Transmitting (check the box that best applies):

- New policy
 Policy change
 Policy clarification
 Executive letter
 Administrative Rule
 Manual update
 Other:

Applies to (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County Mental Health Directors |
| <input type="checkbox"/> Area Agencies on Aging: {Select type} | <input type="checkbox"/> Health Services |
| <input type="checkbox"/> Aging and People with Disabilities | <input checked="" type="checkbox"/> Office of Developmental Disabilities Services (ODDS) |
| <input type="checkbox"/> Self Sufficiency Programs | <input checked="" type="checkbox"/> ODDS Children’s Intensive In Home Services |
| <input checked="" type="checkbox"/> County DD program managers | <input type="checkbox"/> Stabilization and Crisis Unit (SACU) |
| <input checked="" type="checkbox"/> Support Service Brokerage Directors | <input type="checkbox"/> Other (please specify): |
| <input checked="" type="checkbox"/> ODDS Children’s Residential Services | |
| <input type="checkbox"/> Child Welfare Programs | |

Policy/rule title:	Abuse and Serious Incident Management		
Policy/rule number(s):	OAR 411-415-0055(1)(e)	Release number:	
Effective date:		Expiration date:	
References:			
Web address:	https://www.oregon.gov/odhs/rules-policy/oddsrulesdocs/411-415.pdf		

Discussion/interpretation: This Policy Transmittal is replacing PT 22-046 and DD-AR-21-002.

It is an Office of Developmental Disabilities Services (ODDS) waiver and an Oregon Administrative Rule (OAR) requirement that Case Management Entities (CMEs) develop an Incident Management Team (IMT) which meets at least quarterly to identify

trends, develop responses, and identify actions they will take to address concerns or systemic issues that may pose health and safety concerns for individuals they support. IMTs must include specific staff roles, review serious incidents for trends and submit their findings to ODDS quarterly on a format determined by ODDS.

CMEs are required to meet quarterly and hold an IMT meeting. At this time, all serious incidents, and instances of abuse from the quarter under review must be reviewed and documented on the Department approved form, which can be found here: <https://www.oregon.gov/odhs/providers-partners/idd/Documents/imt-report.docx>

OAR 411-415-0055(1) (e) outlines the requirements for Brokerages and Community Developmental Disabilities Programs (CDDPs) in regard to IMT.

IMT reports are due on the following schedule:

Quarter 1 (January, February, March) – Submission due May 1

Quarter 2 (April, May, June) – Submission due August 1

Quarter 3 (July, August, September) – Submission due November 1

Quarter 4 (October, November, December) – Submission due February 1

IMT reports are to be submitted to: IMT.Submissions@odhsoha.oregon.gov

ODDS will track submissions each quarter and review for timely submissions from each CME and completion of IMT submissions. ODDS may utilize these reports and any provided feedback to inform internal processes, as well as communicate with specific CMEs around data that is submitted.

Communication/training:

This transmittal will be discussed during the next Monthly Transmittal Review. Please send questions in advance to ODDS.Questions@odhsoha.oregon.gov.

The Monthly Transmittal Reviews are held the second Wednesday of every month at 2 p.m. using the Zoom platform. Please register in advance for these meetings:

<https://www.zoomgov.com/meeting/register/vJlsc-qvqD8iGURx5OQk8TAdIS6Arg9ZAf4>

After registering, you will receive a confirmation email containing an appointment and information about joining the meeting. American Sign Language (ASL) and live captioning will be provided. To request other accommodations or languages, please send an email to ODDS.Questions@odhsoha.oregon.gov at least three business days prior to the meeting.

Field/stakeholder review: Yes No

If yes, reviewed by: Posted on E & I page for two weeks for review and feedback.

If you have any questions about this policy, contact:

Contact(s): Chelsea Randall	
Phone: 503-915-9585	Fax:
Email: IMT.Submissions@odhsoha.oregon.gov	