



CONNECTICUT DEPARTMENT OF PUBLIC HEALTH



Facility Licensing and Investigations Section

An Overview of Reportable Events

Maureen Golas Markure, MSN, RN

Supervising Nurse Consultant

Facility Licensing and Investigations Section

- Licenses healthcare facilities including nursing homes
- Certifies facilities for participation in the federal Medicare and Medicaid programs through a contract with the Centers for Medicare and Medicaid Services (CMS)
- Purpose of inspections and investigations is to determine compliance with state and federal requirements for nursing homes.

Centers for Medicare and Medicaid Services (CMS)

- CMS is responsible for assuring that health care providers participating in the Medicare and Medicaid Programs meet applicable federal requirements
- Section 1864(a) of the Social Security Act allows CMS to designate State health agencies to be responsible for provider certification and the process of determining whether health care entities meet federal standards.

FLIS Surveys and Investigations

- Standard surveys of nursing homes are conducted with Life Safety Code surveys every nine to fifteen months to determine compliance with federal requirements.
 - Note: CMS temporarily suspended standard surveys from March 23, 2020 to August 2020
 - In response to the COVID-19 pandemic FLIS conducted multiple Focused Infection Control Surveys at all Connecticut nursing homes. Currently, these surveys are conducted in response to identified needs.

FLIS Investigations

- Nursing Home investigations are conducted in response to:
 - Complaints that are submitted from sources that include patients, families, facility employees, other state agencies and attorneys.
 - Reportable Events submitted by the nursing home that require investigation based on a determination by FLIS

Reportable Event Submission

- The Connecticut Public Health Code Section 19-13-D8t(g) requires chronic and convalescent nursing homes to report incidents to the Department in accordance with specified classifications.
- Connecticut's 210 licensed nursing homes currently submit Reportable Events electronically to a FLIS Reportable Events Website.

Reportable Events

- Reportable Event documentation is maintained on the FLIS Reportable Events website. A message system is used to request and receive additional information.
- Enter as much information as possible when begin report and included key diagnoses.
- Two nurse consultants oversee, review and triage all reportable events including reports of outbreaks.
- Duty Officers are electronically notified of high priority incidents after business hours and on weekends and holidays. Follow up calls and onsite visits are made as indicated.

Connecticut Public Health Code includes Five classifications of Reportable Events

- A Class A incident is defined as an event that has caused or resulted in a resident's death or presents an immediate danger of death or serious harm.
- Class A Reportable Events are to be reported to the Department immediately with preliminary information included. A complete report is required within 72 hours of the event, and a summary of the event is to be submitted within five working days of the incident.
- Examples:
 - Elopement: Instances when a resident leaves the facility when doing so presents an imminent danger to the person's health or safety.
 - Choking incident which requires the Heimlich maneuver

Classifications of Reportable Events

- Class B Reportable Events include Outbreaks and allegations of abuse which may be verbal, physical, psychological or sexual.
- Allegations of resident abuse include abuse by any person including staff to resident abuse as well as resident to resident incidents.
- According to the Connecticut Public Health Code, Class B Reportable Events are to be submitted to the Department immediately, and a **complete report is required within 72** hours of the event. A summary of the event is to be submitted within five working days of the incident - **no summary required within 5 days for outbreaks.**

Classifications of Reportable Events

- The Code of Federal Regulations 483.12(c)(1) further stipulates that the facility must ensure all alleged violations involving abuse, neglect, exploitation or mistreatment including injuries of unknown source and misappropriation of resident property are reported to the state survey agency in accordance with the following requirements:
 - Immediately but not later than two hours after an allegation is made if the event that causes the allegation involves abuse or results in serious bodily injury
 - Not later than twenty-four hours if the events that cause the allegation do not involve abuse and do not result in serious bodily injuries
 - Examples:
 - ❖ Allegation of verbal abuse by a nurse aide who refused to provide care and threatened to remove the call bell from the wall if two residents rang the call bell again
 - ❖ Misappropriation of resident property including a wedding ring, diamond bracelet and credit card.

Classification of Reportable Events Class C

- An event including but not limited to the loss of emergency generator power, loss of heat or the loss of the water system resulting in the evacuation of one or more patients within or outside the facility and all fires regardless of whether services are disrupted
- Class C Reportable Events are to be initiated immediately with a complete report within 72 hours and a summary submitted within five working days.

Classification of Reportable Events Class C (continued)

- **Recent examples:**
 - **Torrential Rain resulted in the evacuation of all residents of a nursing home after the roof leaked. Residents were transferred to another nursing home in the area.**
 - **After the loss of street power during a storm, a facility lost generator power several hours later, resulting in the temporary evacuation of residents with critical care needs.**
 - **In preparation for Hurricane Henri the residents of five nursing homes along the shoreline were evacuated to other facilities**
 - **Representatives of the Facility Licensing and Investigations Section were onsite during all of these incidents to ensure the safety of the residents**

Classification of Reportable Events Class D

- A Class D Reportable Event is an incident that results in a serious injury and/or a significant change in the resident's condition.
- A Class D Reportable Event is to be submitted within 72 hours of the incident with a summary submitted within five working days.
- Examples:
 - Fall with a fracture
 - Medication errors

Classification of Reportable Events Class E

- A Class E Reportable Event is an incident that causes minor injury or distress. An example of this is a fall with an abrasion.
- All Reportable Events, with the exception of Class E incidents, are submitted to the Department's FLIS Reportable Event website.
- For Class E incidents the facility is required to complete a written report which is maintained at the nursing home and is available for review by the Department of Public Health.

Review of Reportable Events

- Each Reportable Event and its summary are reviewed following the facility's submission of the report. The purpose of the review is:
 - To determine the significance of the Reportable Event and whether additional information is needed
 - To determine whether the incident will be entered for investigation in our federal database known as ACTS which is an acronym for the ASPEN complaints tracking system.
 - To determine the level of priority for the investigation. If a Reportable Event is determined to be the highest priority, an investigation may be initiated immediately to ensure the safety of the residents.

Determination of Priority of Investigations

- A two-day high priority investigation is entered when a Reportable Event and our follow up with the facility indicates that Immediate Jeopardy may exist.
- According to CMS Immediate Jeopardy is defined as a situation in which the provider's noncompliance with one or more requirements of participation has caused or is likely to cause serious injury, harm or death to a resident.
- Reportable events that are entered as a high priority Immediate Jeopardy investigation must be investigated within two working days.
- Examples:
 - Failure to initiate CPR when indicated
 - Choking episode resulting in significant harm or death after resident received wrong food consistency

Determination of Priority of Investigations

- A Non-IJ high priority investigation is investigated within ten working days.
- Intakes are assigned this priority if the alleged noncompliance with one or more requirements or conditions may have caused harm that negatively impacts the individual's mental, physical and/or psychosocial status and are of such consequence to the person's well being that a rapid response by the state agency is indicated.
- Example:
 - Staff to resident abuse

Determination of Priority of Investigations

- The third level of investigation is a non-IJ medium priority. Intakes are assigned this priority if the alleged noncompliance with one or more requirements caused or may cause harm that is of limited consequence and does not significantly impair the individual's mental, physician and/or psychological status or function.
- These are to be investigated within 45 working days.
- An example of a Reportable Event that was entered as a 45-day medium priority investigation related to an incident when a resident fell from a mechanical lift while being transferred from a chair to the bed, resulting in bruises and abrasions and a possible head injury.

Practitioner Referrals

- Practitioners are referred to the Department's Practitioner Licensing and Investigations Section following some investigations.
- For example:
 - Referrals are made to the Practitioner Investigations Unit when an investigation substantiates that a practitioner has diverted medications. Referrals are also made to the Drug Control Division at the Department of Consumer Protection regarding allegations of drug diversion.
 - Substantiated abuse may also result in the referral of a practitioner to the Practitioner Investigations Unit. The investigations conducted by PLIS may result in a referral to the Office of Legal Compliance and disciplinary action including revocation of a license.

Discussion and Questions

Contact information:

Barbara A. Yard

Health Program Supervisor

Facility Licensing and Investigations Section

Healthcare Quality and Safety Branch

CT Department of Public Health

Telephone: (860) 509-7446

[Email: barbara.yard@ct.gov](mailto:barbara.yard@ct.gov)