

Topic: Requests for Incident Report Information	Department: All programs and services
Original effective date: 7/2007	Last revision date: 4/2019
Owner: Incident Manager	Frequency of reviews: As needed
Internal/Regulatory Reference(s) (all that apply): Jonathan’s Law, NY MHL 33.23 and 33.25	
Related documents/Links: Requests for Event Report Information Table, Documentation of Requests for Incident Report Information	

Policy

People are free from abuse and neglect.

Additional Information

In accordance with Jonathan’s Law-NY MHL 33.23 and 33.25, the Arc of Monroe is committed to working with individuals and their advocates to establish open communication and trust while also protecting the confidentiality of the people supported and other individuals involved in the incident reporting and investigation process. The Arc of Monroe will comply with all regulations and Mental Hygiene Laws related to the release of incident reports and investigations.

Procedure	
Task:	Responsible party:
When any employee is notified by any person of a request for information in relation to a 147 incident report and that request exceeds a general description of the event (without any use of names) and the protective actions being taken to keep the involved person safe, the program Sr. Director and Vice President or AOD 2 will immediately (defined as within the shift the request is made) be notified.	All Employees
Will contact the person requesting the information within 24 hours to clarify what information is being requested and will explain how to complete the request (see attached Request for Event Reporting Information table for details). The requestor will be asked to direct all correspondence to the Sr. Director of the program that filed the original event report.	Sr. Director / VP / Designee
Will notify the COO, CEO, and the involved Incident Coordinator of the initial request during the first business day following the request.	Sr. Director / VP / Designee
Upon receipt of a written request, will determine if the person is a qualified person, verify if a capable adult person supported objected or agreed to the release (this is noted on the Supplemental Notification Form), and if the information requested is eligible to be released.	Sr. Director / VP / Designee
If the request cannot be met for any of the above reasons the CEO and COO will be notified. The determination will be explained in writing to the requestor. Within the written correspondence the requestor will be informed of their right to appeal the decision per the 624 regulation and the contact information to initiate the appeal will be provided. A copy of the request and the response will be sent to the Incident Coordinator.	Sr. Director / VP / Designee
If the request can be met, will offer to meet with the requestor within 10 days of receipt of a written request for an initial incident report or within 21 days of the written request or within 21 days of the SRC determination that the assessment is	Sr. Director / VP / Designee

complete and a vote is taken if assessment information is requested.	
If the offer to meet is accepted, will consult with the CEO and COO to determine who will attend the meeting and make arrangements for the meeting. Any requested written materials will be provided and reviewed during the meeting.	Sr. Director / VP / Designee
If the meeting is declined, the CEO and COO will be notified and the materials will be provided to the requestor within the guidelines defined on the Request for Event Report Information table. A copy of the written request will be sent to the Incident Coordinator.	Sr. Director / VP / Designee
If any part of the request includes a release of documents related to the event, will gather the requested documents and complete the initial review and redaction of names and other identifying information per 624 regulations.	Incident Coordinator
If part of the assessment records, will mark each page with a written notice of re-disclosure prohibition. Will send redacted documents to the Vice President.	Incident Coordinator
Will complete review of redacted documents to ensure all identifying information has been removed. Will release the documents to the qualified requestor during a meeting or if the meeting is refused, will send via certified return receipt letter. <ul style="list-style-type: none"> - If the request was made prior to the JC determination that the investigation was complete and a vote was taken, the records are to be released no later than 21 days after the closure date. If the request was made after the case was reviewed and voted on, the records are to be released no later than 21 days after the request was made. - A cover letter will accompany all releases, whether given in person or via mail. If assessment records are included, the cover letter will include the Sr. Director / VP / Designee contact information and a statement that the documents have been disclosed in accordance with New York State Mental Hygiene Law and that it is a violation of the law to further disseminate the documents. 	Sr. Director / VP / Designee
Will document the release and send documentation and a copy of all released information, meeting date, and the names of people in attendance to the Incident Coordinator.	Sr. Director / VP / Designee
Will attach all documentation of requests, responses, meetings, and copies of released materials to the original event report case file.	Incident Coordinator

Document revision record:

Revision Date	Release Date	Reason for change	Approver