

Topic: Response to Investigation	Department: All programs and services
Original effective date: 7/2013	Last revision date: 8/1/24
Owner: Incident Manager	Frequency of reviews: As needed
Internal/Regulatory Reference(s) (all that apply): OPWDD Regulation-Part 624	
Related documents/Links: Response to Investigation Form	

Policy

People are free from abuse and neglect.

Additional Information

In response to completed investigations for filed incidents (defined by OPWDD Part 624 / 147 or 150); within 10 days the agency must develop a plan of prevention and remediation to be taken to assure the continued health, safety, and welfare of People Supported and to provide for the prevention of incident reoccurrence.

The plan must include written endorsement by the CEO or designee (Incident Management Department personnel) and identify projected implementation dates and specify by title agency staff that are responsible for monitoring the implementation of each recommendation identified within the investigation. In addition, corresponding verification documents must accompany the response (when applicable).

Such plans must also include direct follow-up with all involved People Supported. Specific documentation of follow-up should include the following:

- Recap of the incident
- Answers to any questions they may have
- Validation of existing concerns
- Offer / brainstorm available supports

Such plans must be entered into IRMA by the close of the 5th working day after the development of the plan, per regulation, and thus allowing for closure in IRMA within required timeframes.

Procedure	
Task:	Responsible party:
Receives and reviews completed investigations for filed incidents.	Site Manager / Director
Completes Response to Investigation Form and submits (via scan / email) to the Incident Coordinator within 10 days of receiving the completed investigation. Completed corresponding verification documents must accompany the response (ex. CAFU, training sheets, revised plans, etc).	Site Manager / Director
Reviews and approves the Response to Investigation Form with verification documents and enters / uploads the information into IRMA – Corrective Action Plan tab by the close of the 5 th working day after the development of the response / plan to prevent (within 15 days of investigation completion).	Incident Coordinator / Incident Manager
For incidents classified as abuse: follow-up information will be entered into IRMA –	

Corrective Action Plan tab no later than 15 days after receiving the JC Determination.	
AARM submissions for substantiated abuse involving identified custodians will be completed within 15 days of receiving the JC Determination letter.	Incident Manager
<p>Will ensure closure of the incident within IRMA once the investigation has been accepted by the SRC, after JC Determination received (when applicable) and Corrective Action Plan submission.</p> <p>Closed with Corrective Action Plan follow up can be used in IRMA as needed for incidents requiring long-term follow-up (ex. medical follow-up, court dates, policy/procedure development), resulting in IRMA closure within required timeframes, while remaining on the agency SRC agenda for continued review through resolution.</p> <p>* Incidents under the authority of the JC require closure in IRMA within 80 days of JC Determination (Reportable - Abuse) or within 80 days of occurrence (Reportable - Significant).</p> <p>* Incidents not under the authority of the JC require closure in IRMA within 90 days of occurrence (Notable Occurrences, 150).</p>	Incident Management Designee

Document revision record:

Revision Date	Release Date	Reason for change	Approver
8/1/24	8/5/24	Clarification of timeframes and expectations to assist with timely incident closure within IRMA.	Deanna Crosser