



Division of Health Improvement (DHI) Program Operations Bureau (POB)

REPORTING REQUIREMENTS FOR ALL LICENSED HEALTHCARE FACILITIES

January
2022

WEBSITE:
[HTTP://DHI.HEALTH.STATE](http://dhi.health.state.nm.us)
[.NM.US](http://dhi.health.state.nm.us)

HOTLINE: 1-800-752-8649

FAX: 1-888-576-0012

EMAIL:
[INCIDENT.MANAGEMENT](mailto:INCIDENT.MANAGEMENT@STATE.NM.US)
[@STATE.NM.US](mailto:INCIDENT.MANAGEMENT@STATE.NM.US)

Department of Health Contact Information

PURPOSE



The purpose of this training is to refresh all licensed Health Care Facilities of the current ANE (Abuse, Neglect and Exploitation) reporting regulations and potential consequences associated with non-reporting.

GOALS

- ✓ Help improve facility Incident Reports and 5 day follow up investigative report.
- ✓ Reduce complaint surveys in your facilities.
- ✓ Build rapport, relationship and trust with the State Agency (SA).



REGULATIONS REGARDING REPORTING REQUIREMENTS

[NMAC 7.1.13](#)- This regulation establishes standards for **licensed health care facilities** to institute and maintain an incident management system and employee training program for the reporting of allegations of abuse, neglect, misappropriation of property and injuries of unknown origin.

[NMAC 7.12.2](#) - This regulation establishes minimum standards for licensing of **hospice facilities** and **agencies that provide inhome and inpatient hospice care**, and, to monitor these regulations, through surveys, to identify any area which could be dangerous or harmful to the patient, family, or staff.

[NMAC 7.28.2](#)-This regulation establishes minimum standards for licensing of **home health agencies** who provide medically directed therapeutic and/or supportive services to a patient/client in their place of residence.

Monitoring compliance with these regulations, through surveys, to identify any areas which could be dangerous or harmful to a patient/client or staff.

Encourage the establishment and maintenance of home health agencies to provide medically directed therapeutic and/or supportive services, to a patient/client in their place of residence, that maintain or improve the health and quality of life to patients/clients who are in New Mexico.

Facilities should also review the Incident Management Guide for All Licensed Health Care Facilities 2019-2020

DEFINITIONS



ABUSE

NEGLECT

COMPLAINT

REPORTABLE INCIDENT

ABUSE

7.1.13.7 A. Abuse –

- (1) Knowingly, intentionally and without justifiable cause inflicting physical pain, injury or mental anguish, and includes sexual abuse and verbal abuse.
- (2) Intentional deprivation by a caretaker or other person of services necessary to maintain the mental and physical health of a person
- (3) Sexual abuse, including criminal sexual contact, incest and criminal sexual penetration
- (4) Verbal abuse, including profane, threatening, derogatory, or demeaning language, spoken or conveyed with the intent to cause mental anguish.

NEGLECT



7.1.13.7 T. Neglect-

Failure of the caretaker to provide basic needs of a person, such as clothing, food, shelter, supervision and care for the physical and mental health of that person. Neglect causes or is likely to cause harm to a person.

COMPLAINT

7.1.13.7 D. Complaint –

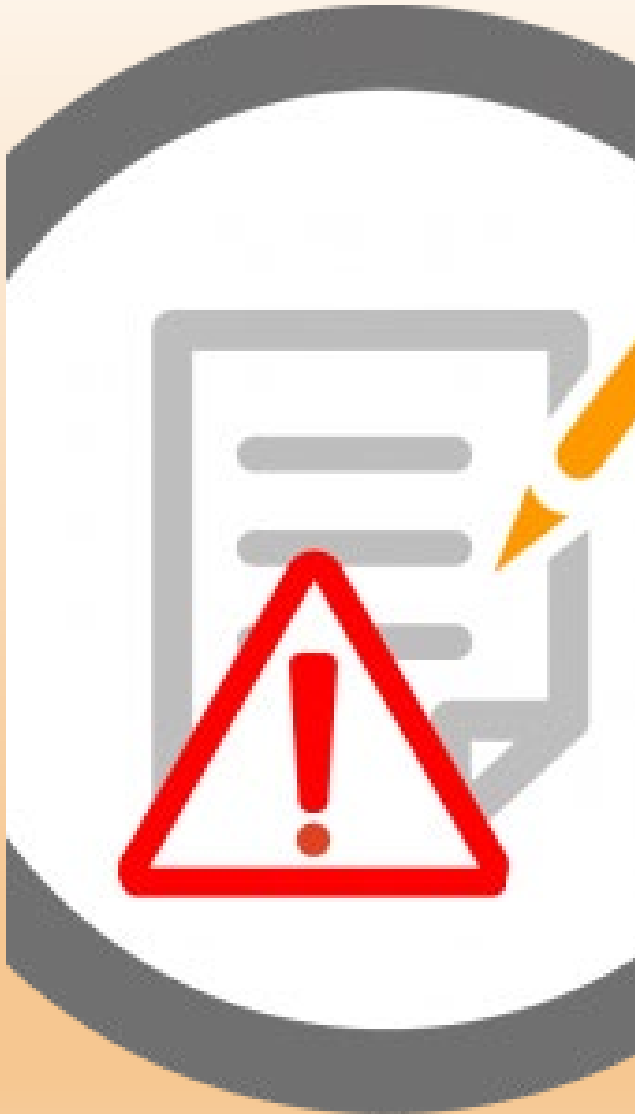
Any report, assertion, or allegation of abuse, neglect, or exploitation of, or injuries of unknown origin, to a consumer, made by a reporter to the incident management system, and includes any reportable incident that a licensed health care facility is required to report under applicable law.

REPORTABLE INCIDENT

7.1.13.7 W. Reportable incident –

Possible abuse, neglect, exploitation, injuries of unknown origin and other events but not limited to:

- Falls which cause injury
- Unexpected death
- Elopement
- Medication error which causes or is likely to cause harm
- Failure to follow a doctor's order or an ISP
- Any other incident which may evidence abuse, neglect, or exploitation.



OTHER REPORTABLE INCIDENTS:

Environmental Hazards

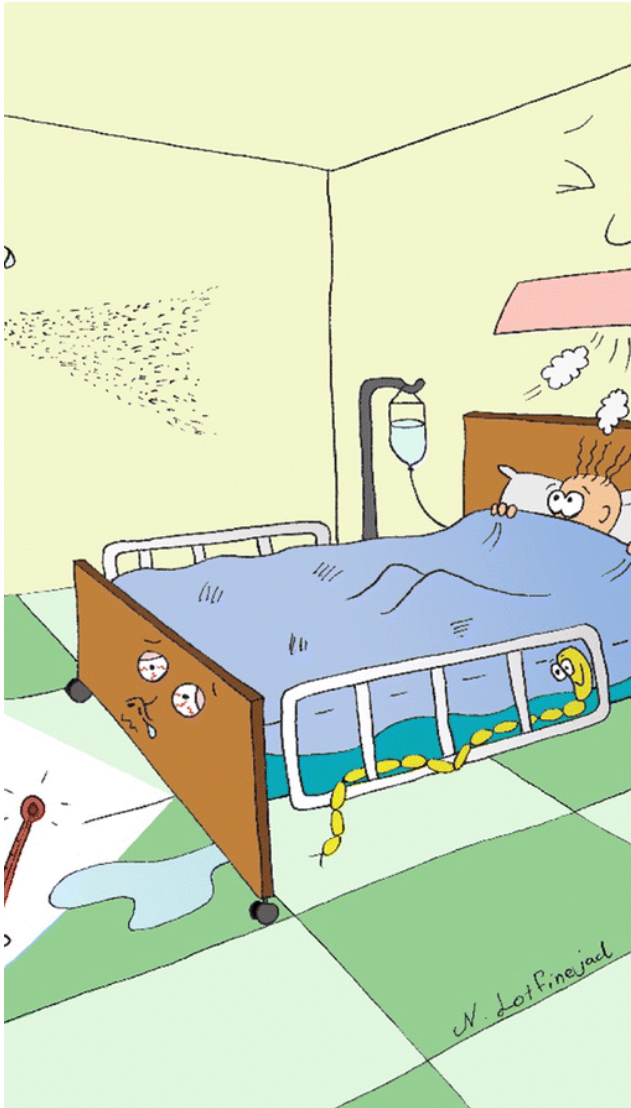
- Water issues – no water, no hot water
- Gas leaks – in or outside facility.
- Electrical issues – air conditioner, heater, lights
- Any environmental issue that may affect residents

Infection Control/Outbreaks

- Facilities must alert DHI **and** Epidemiology for issues such as COVID 19, norovirus, influenza, GI outbreaks, etc.

Other Reportable

- Bed bugs, ants



Nursing Homes



This Photo by Unknown Author is licensed under [CC BY-NC-ND](https://creativecommons.org/licenses/by-nc-nd/4.0/)

Required under 42 CFR 483.12 to report and investigate all allegations of abuse, neglect, exploitation, or mistreatment, including injuries of unknown source, and misappropriation of residents' property to the state agency.

Reported immediately, but not later than 2-hours after the allegation is made, allegations involve abuse or have resulted in serious bodily injury.

Report no later than 24-hours, if the events that cause the allegation do not involve abuse and do not result in bodily injury, to the administrator and SA/APS.

Assisted Living Facilities/Other Facility Types

7.1.13.8 A. Duty to Report:

- (1) All licensed health care facilities shall immediately report abuse, neglect or exploitation to the adult protective services division.
- (2) All licensed health care facilities shall report abuse, neglect, exploitation, and injuries of unknown origin or other reportable incidents to the bureau within a 24-hour period, or the next business day when the incident occurs on a weekend or holiday.
- (3) All licensed health care facilities shall ensure that the reporter with direct knowledge of an incident has immediate access to the bureau incident report form to allow the reporter to respond to, report, and document incidents in a timely and accurate manner.

INCIDENT REPORT

Revised 4/08/2009

New Mexico Department of Health

DOH/DHI Use Only

HFL&C INCIDENT REPORT (SFY 2011)

Fields in red are required

SECTION 1 - CONSUMER INFORMATION

Name of Consumer First: Middle: Last:

Social Security # Gender Male Female DOB:

Residence Address Street Address: City: Zip: Phone:

Consumer Competency Level High Moderate Low

ADLs (Resident Needs Assistance With) Check All That Apply

Walking Wheelchair Bathing Eating Transfer

Total Care None Verbal Yes No

Diagnosis(es):

Name of Consumer's Doctor: Doctor's Phone:

SECTION 2 - DESCRIPTION OF INCIDENT

(Staff person with the most direct knowledge of incident fills out this section)

TYPE OF ALLEGED INCIDENT

Abuse Neglect Exploitation Injuries of Unknown Origin

Person responsible for individual's care at time of incident:

Name: Title: Phone:

Has this happened before? YES NO

Was anyone else present at the time of the incident? YES NO If YES, Identify below:

Name: Title or Relationship: Phone:

Name: Title or Relationship: Phone:

- Any person may report an incident to the bureau by utilizing the DHI toll free complaint hotline at 1-800-752-8649.
- Any consumer, employee, family member or legal guardian may also report an incident to the bureau directly or through the licensed health care facility by written correspondence or by utilizing the bureau's incident report form.
- The incident report form and instructions for the completion and filing are available at the division's website, at https://dhi.health.state.nm.us/elibrary/ironline/hflc_instructions.php
- Or may be obtained from the department by calling the toll-free number at 1-800-752-8649.

When does a facility's self-report investigation begin?

- Immediately (within 2-hrs) of the incident occurs or when you become aware of the incident. Then submit the 5-day follow-up.
- Interview all involved: affected resident, other residents, staff, visitors

When conducting Interviews, use the 5 W's and How:

Who: identifies the subject or persons being discussed. It can also include victims, witnesses, and any other people that are integral to the report.

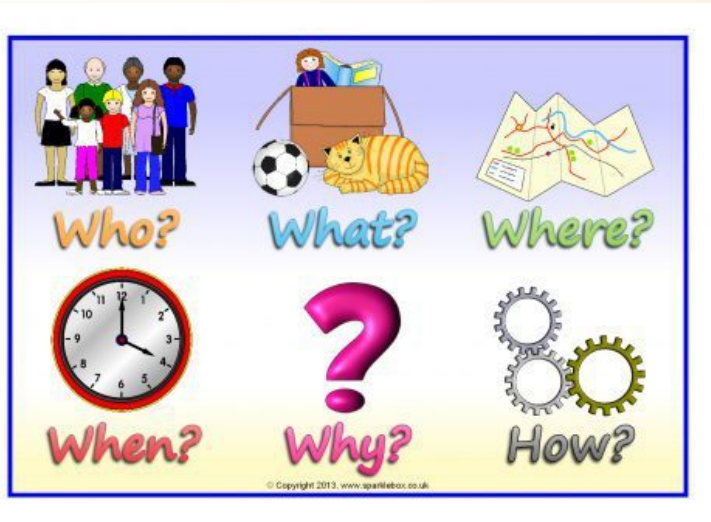
What: is an important part of the story because it tells you the event or action that happened. It can be an event, moment or objects.

When: this is the part of the story that gives the time and date of the event. If the event has a set time frame, then it should be listed properly.

Where: identifies the location, residents' room, on the patio, dining room, hallway, in the bathroom etc..

Why: resident getting out of bed, getting out of the wheelchair.

How: did it happen? resident slipped, resident was eating, etc.



5 day Follow up Investigative Summary Report NMAC 7.1.13.10(c)

INFORMATION NEEDED

- Facility name
- Date of incident/resident's name
- Brief summary of incident
- Facility actions after incident
- Future Preventative/Corrective Action for resident(s) health and safety
- Conclusion
- If allegations of ANE: Were the allegations Substantiated or Unsubstantiated



MICHELLE LUJAN GRISHAM
Governor
DR. TRACIE C. COLLINS, M.D.
Secretary-Designate

COMPLAINT NARRATIVE INVESTIGATION REPORT (5 day)

Name of Facility: _____
Address: _____ **Phone #** _____
License# _____
Administrator Name: _____

Resident Name: _____ **DOB:** _____
Date of incident: _____

Brief Summary of incident:

Facility Actions after the incident:

Future Preventative/Corrective Action for resident(s) health and safety:

Conclusion:

If allegations of abuse/neglect/exploitation: Substantiated or Unsubstantiated

Report completed by:

 Name, Title and Phone Number

SEND THE 5 DAY FOLLOW UP REPORT TO:
 DHI COMPLAINTS UNIT, PO BOX 26110, SANTA FE, NM 87505
 ALTERATELY, YOU MAY FAX IT TO: 888-576-0012
 • www.dhi.health.state.nm.us



DOH-DHI Process

- Incident reports/follow-up reports must be legible, or it may be rejected/ask to be resubmitted.
- 5-day follow-up report request for a 2-day extension will be granted if requested within the 5-days (Please contact us if you need an extension)
- Late 5-day follow-up reports may result in an onsite investigation.
- 1 attempt from DOH will be made to request additional information with a 2-day extension.

Helpful Additional Information:









- A complete and thorough follow up investigative summary report that includes corrective and preventative measures that have been implemented.
- Include any policy and procedures changes and training that has been implemented.
- Residents condition prior to incident, mental and physical needs, and diagnosis. (Do not use diagnostic code numbers)
- Conclusion – was the allegation substantiated/unsubstantiated

Facilities/Agency Expectations

- Improve operational systems/update care plans
- Establish and maintain an incident management system which emphasizes the principles of prevention and staff involvement.
- Train staff regularly on how to respond to, report, and document reportable incidents in a timely and accurate manner. (documentation of training)
- Be transparent with Incident Report and 5-day follow-up
- Use DOH-DHI as a resource
- All licensed health care facilities shall post 2 or more posters, to be furnished by the division, in a prominent public location which states all incident management reporting procedures, including contact numbers and internet addresses. (facilities with 60 or more should have 3 posters)



Complaint RED Flags

-  Late incident or follow up investigative summary reports
 -  Incomplete incident reports
 -  Repeat falls
 -  Repeat incidents involving the same resident
 -  Repeat concerns from families/ombudsman
-
-  Facility not returning DOH phone calls, and the request for follow reports and additional information.