

Network Service Provider (NSP) Incident Reporting – Report Timeliness and Corrective Action

Policy


It is the policy of Central Florida Behavioral Health Network, Inc. (CFBHN) to report all incidents to the Department of Children and Families (DCF) within the timeframes required by SunCoast Regional Operating Procedure (ROP) 215-4.

Purpose

The purpose of this policy is to ensure that incidents are reported to CFBHN, and in turn to DCF, within required timeframes. It also outlines the procedure followed if an NSP's incident report submissions do not meet the timeliness standards established by CFBHN and DCF.

Procedure

- A. The date of occurrence, date/time of discovery and date/time of submission are documented for all incidents submitted to CFBHN by an NSP.
- B. The timeliness of incident reports submitted by an NSP to CFBHN, and subsequently from CFBHN to the Department, is documented in the monthly report compiled by Risk Management.
 1. The Risk Manager or Risk Specialist alerts the NSP if an incident report is late.
 2. The reason that an incident report is submitted late, if known, is recorded in the incident report.
- C. It is the responsibility of the Risk Management department to track report timeliness, and to note if a specific organization has trouble meeting requirements related to incident reporting timelines.
 1. The CQI Director and Risk Manager review report data for that organization, including the frequency and number of late reports received by CFBHN, and explanations provided by the NSP as to why the late reports have occurred.
 2. With the goal of preventing future late reports, the next course of action will be determined. These actions may include:
 - a. Formal notification of the issues related to the timeliness of incident report submission, by email or letter, to the organization's CEO, Quality Improvement Director, and the individual responsible for the reporting of incidents to CFBHN. The notification will also include a summary of sanctions that may be enacted if the problem is not corrected.
 - b. A Corrective Action issued by the Risk Management department to the organization's CEO. This step will require the NSP to submit a Corrective Action Plan that outlines the steps that will be taken to ensure that incident report submission timelines are met. Plan compliance will be monitored by the Risk Manager and Risk Specialist and reported at monthly Risk Management meetings.
- D. An annual summary of the timeliness of incident reports submitted by NSPs is included in the year-end Risk Management data report.

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