.01 Purpose: The DHR Incident Report Form provides for consistency in meeting reporting requirements. DHR licensed providers will document all agency emergencies on the Incident Report Form. A Child Placement Agency that routinely uses the incident report form required by the Department of Juvenile Services or the Department of Health and Mental Hygiene Developmental Disabilities Administration, Child and Family Services Agency (CFSA) or the Department of Youth Rehabilitation Services (DYRS) may substitute that form for the DHR Incident Report Form. No other format will be accepted.

.02 Reference:

.02.01 COMAR 07.05.01.08 Reporting Responsibilities for Child Placement Agencies

A. Agency Emergencies

(1) The agency shall maintain and make available to the Administration a written plan detailing employee responsibilities for all emergencies which may affect the:

(a) Agency operation; or

(b) Health, safety, and well-being of children in care or receiving adoption services.

(2) The agency shall notify the Administration by phone immediately, and in writing within 48 hours of the occurrence, of the following emergencies;

(a) Death of a child in foster care or receiving adoption services;

(b) Accident, assault, illness, or psychiatric episode of a child which requires hospitalization or emergency medical care;

(c) Suspected incident of child abuse or neglect, including mental injury;

(d) Illegal activity leading to the incarceration of a child, parent, foster parent, guardian, or adoptive parent; or

(e) Other occurrences which may affect the health, safety, or well-being of children in care or receiving adoption services.
.03 Policy: All programs licensed by DHR Office of Licensing and Monitoring (OLM) will submit all written reportable incidents to OLM, within the timeframes mandated by the above referenced COMAR regulations.

.04 Procedure:

.04.01 Licensed programs will immediately telephone the program’s assigned Licensing Coordinator of any critical incident. If the Licensing Coordinator is not available, the program shall leave a voice mail message or email.

.04.02 All incident reports will be submitted using the Incident Report Form. Programs that are required to submit incident reports on forms required by the Department of Juvenile Justice or by the Department of Health and Mental Hygiene Developmental Disabilities Administration, Child and Family Services Agency (CFSA) or the Department of Youth Rehabilitation Services (DYRS) may substitute those forms for the Incident Form. No other reporting format will be accepted.

.04.03 The Incident Report Form must be submitted to OLM via e-mail at olm.incidents@maryland.gov or by facsimile at 410-333-8408.

.04.04 Providers are to provide additional information about the incident upon request by OLM.

.05 Exhibits:

.05.01 Instructions for Completion of the OLM Incident Report Form

.05.02 Incident Report Form