

GRC DEFINITIONS

The following is a guide to common terms you will see in the GRC. You should follow-up with your supervisor regarding any incidents you submit, and also check back on the report to see if any additional information has been added.

Status: All incidents have a status assigned based on where it is in the review process

- **New:** The incident has just been submitted and has not yet been assigned or reviewed
- **Assigned:** The Compliance Team has reviewed and assigned the appropriate owner(s) and managers for action (this will usually be the relevant Director, VP or Chief)
- **In Progress:** The Director, VP or Chief has reviewed the incident and is working on a plan of action or follow-up
- **On hold:** If for some reason the incident cannot be closed, and additional action is warranted, the incident owner can put the incident “on hold.” This should not be used often, and only in situations where we cannot actively address concerns stemming from an incident
- **Closed:** The Director, VP or Chief has completed the review of the incident and documented the next steps and action plan.
 - Closing an incident does not mean all follow-ups are completed, it just means the Director, VP or Chief feels comfortable documenting next steps and moving forward with the plan

Assignment: All incidents are assigned an owner

- **Incident Owner:** The primary Director, VP or Chief who should oversee the investigation and follow-up. Often times, the Director, VP or Chief of the staff person who submitted the incident
- **Incident Manager:** This is used if the incident needs to be co-worked on OR more than two people need additional access. For example, during a Code Green/Code Orange, we would notify Behavioral health and Operations
- **Additional Access:** Incidents often involve multiple departments. Additional Access is used to grant more people access to the incident to follow-up or add information to the incident

Priority Level (see page 2): Some incidents will be assigned a priority level

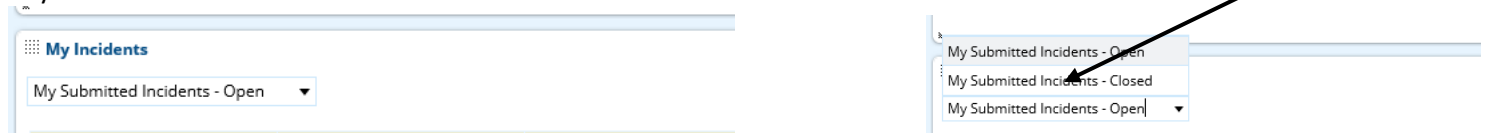
- **High (H): Impacts staff or client safety that requires immediate action**
 - Incidents should be addressed immediately, within 24 hours of the incident including following up with staff or affected clients. The full investigation should be conducted within 14 days.
- **Medium (M): Incident is serious in nature, but does not pose an immediate threat to staff or clients**
 - Incidents should be addressed within 72 hours including follow-up with staff and clients.
- **Low (L): An event with minimal impact on client or staff safety and requires minimal remediation**
 - Incidents involve minimal follow-up and can often be closed immediately.

Resolution and Timeline: Information gathered from an ongoing or concluded “investigation” that documents steps taken to resolve an issue are logged in the resolution tab.

- Within 30 days of creating an incident, someone should follow up with you regarding the plan and any follow-up actions (most likely the assigned owner)
- After 45 days, a plan of action should be well established and documented to allow the incident to be closed out. Incidents that require more time should contain documentation noting the progress towards closing
- After 60 days, investigations should be complete and the staff involved should receive an email from the incident owner

How to check on the status of an incident?

If you created the incident, you will see all open incidents on your dashboard under **My Incidents**. You can toggle to view any closed incidents.



When an incident has been closed, you can review the resolution tab within a specific incident for additional information.

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Related Incidents:

Incident Access History: | [View Access History](#) |

General

Related Mappings

Resolution

Priority Level by Incident

<i>HPAA Violation</i>	<i>Treatment/Diagnostic/Procedure</i>
<ul style="list-style-type: none"> ❑ Unauthorized release of PHI (High) ❑ Network hacked (High) ❑ Computer virus (High) ❑ Lost/Stolen Agency electronic device (Med) ❑ Improper disposal of client record (Med) 	<ul style="list-style-type: none"> ❑ Needle stick (High) ❑ Wrong client (High) ❑ Wrong treatment/procedure/diagnosis (High) ❑ Client left against medical advice (Med) ❑ Delay/error of contract service (Med) ❑ Incomplete treatment (Med)
<i>Accident</i>	<i>Facilities/Property-Related Occurrence</i>
<ul style="list-style-type: none"> ❑ Injury from mechanical device (High) ❑ Exposure to hazardous or toxic substance (High) ❑ Injury caused by lifting/moving client, furniture or equipment (High) ❑ Fall (client or staff) (High) ❑ Exposure to blood or bodily fluid (High) ❑ Spill (Med) 	<ul style="list-style-type: none"> ❑ Hazard (sharp edge, exposed nails/wire, blocked entryways, issues in stairwells etc. (High) ❑ Fire on premises (High) ❑ Flood on premises (High) ❑ Power failure more than 4 hours (High) ❑ Vandalism (Med) ❑ Equipment failure (item: _____) (Med) ❑ False (fire) alarm (Low) ❑ Vermin (cockroach, bedbugs, rats etc.) (Low)
<i>Medication Error Type</i>	<i>Physical/Verbal/Criminal</i>
<ul style="list-style-type: none"> ❑ Allergic or adverse reaction (High) ❑ Wrong dose (High) ❑ Wrong client (High) ❑ Wrong drug (High) ❑ Wrong route (High) ❑ Wrong time (High) ❑ Given without an order (Med) ❑ Order not sent to/received by the pharmacy (Low) ❑ Order electronically sent to the wrong pharmacy (Low) ❑ Wrong drug dispensed (Pharmacy) (Low) ❑ Medication mislabeled (Pharmacy) (Low) ❑ Incorrect pill count (Pharmacy) (Low) 	<ul style="list-style-type: none"> ❑ Disruptive/disorderly/abusive verbal incident (High) ❑ Threat – against a staff member (High) ❑ Threat – against a client (High) ❑ Threat – against the Agency (High) ❑ Threat – of self-harm (High) ❑ Inappropriate physical contact (grabbing, touching etc.) (High) ❑ Theft (Low)
<i>Code</i>	<i>Vehicle Related (Personal or Agency Owned)</i>
<ul style="list-style-type: none"> ❑ Pink (High) ❑ Orange (High) ❑ Red (High) ❑ Yellow (High/Med/Low) ❑ Green (High/Med/Low) ❑ Blue (Low) 	<ul style="list-style-type: none"> ❑ Accident (Med) ❑ Incident inside the car (Med) ❑ Maintenance Required (Agency owned only) (Med) ❑ Vehicular Vandalism (Agency owned only) (Med)
<i>Other</i>	
Priority will depend on incident and safety considerations	