

6002-F INVESTIGATIVE PROCESS

REVISION DATE: 11/8/23, 6/29/22, 12/18/19, 10/01/14

EFFECTIVE DATE: July 31, 1993

REFERENCES: Division Medical Policy 960 and 961

PURPOSE

To set forth the requirements for investigative activities performed by the Division of Developmental Disabilities' (Division) Quality Management Unit (QMU) to gather and review information and documentation related to reported incidents involving Members served by the Division.

DEFINITIONS

1. "Investigative Process" means a detailed and systematic collection and verification of facts for the purpose of describing and explaining an incident.
2. "Member" means the same as "Client" as defined in A.R.S. § 36-551.
3. "Quality of Care Concern" means an allegation that any aspect of care or treatment, utilization of behavioral health services or utilization of physical health care services, that caused or could have caused an acute medical condition or acute psychiatric condition, or an exacerbation of a chronic medical condition or chronic psychiatric

condition, and may ultimately cause the risk of harm to a Member.

4. “Responsible Person” means the parent or guardian of a minor with a developmental disability, the guardian of an adult with a developmental disability, or an adult with a developmental disability who is a member or an applicant for whom no guardian has been appointed as defined in A.R.S. §36-551.
5. “Trauma-Informed Care” means an approach to care that acknowledges the need to understand an individual’s life experiences in order to deliver effective care and has the potential to improve engagement, treatment adherence, health outcomes, and provider and staff wellness.
6. “Sentinel Event” means an unexpected event that results in death, serious physical injury, or severe psychological harm.

POLICY

A. INVESTIGATIVE PROCESS AND TRAINING

1. The Division’s QMU shall provide investigative training for QMU staff.
2. The QMU nursing leadership shall ensure that clinical staff

complete all required investigative training and achievement of competencies before conducting investigations independently.

3. The Division shall incorporate the principles of Trauma-Informed Care in the training content and requirements for investigations involving individuals with intellectual and developmental disabilities.
4. The Division shall maintain records of attendance and dates for all required investigative training.

B. INVESTIGATIVE PROCESS REQUIREMENTS AND TIMEFRAMES

1. The Division's QMU shall initiate the Investigative Process for all reportable incidents requiring further investigation and adhere to the following investigative requirements and timeframes:
 - a. Upon notification of an incident determined to be a Quality of Care (QOC) Concern, initiate the Investigative Process within one business day.
 - b. Assign a QMU investigative team to conduct the QOC Concern investigation.
 - c. Ensure protective measures are in place to protect the health and safety of the Member or Members.

- d. Ensure measures are in place to prevent any direct contact between the Member and any individual alleged to have endangered the health or safety of the Member until the completion of the investigation and any subsequent remediation.
- e. Complete information requests for Sentinel Events within one business day.
- f. Complete information requests for non-Sentinel Events within seven business days.
- g. Information gathering may be completed for incidents determined not to be a QOC Concern as necessary and appropriate.

C. COORDINATION WITH OTHER AGENCIES

1. The QMU may delay its Investigative Process if an external investigation is initiated by a protective services agency, law enforcement agency, other state agencies or regulatory boards, until the external investigation has been completed in order to avoid potential conflicts.
2. If another state agency is involved, the QMU may coordinate


investigative activities with that agency when applicable and appropriate.

D. INVESTIGATIVE ACTIVITIES

1. The QMU shall include the following investigative activities in accordance with the principles of Trauma-Informed Care and the special needs of Members with intellectual and developmental disabilities:
 - a. Collection and review of documentation, reports, and information relevant to the incident.
 - b. Interview individuals involved in the incident and any witnesses, family members, qualified vendors, Division staff, first responders, or any other individual who may have relevant information.
 - c. Allow the Responsible Person to decline an interview at any time during an investigation.
2. The QMU shall enter documentation of investigative activities in the AHCCCS Quality Management Portal.
3. The QMU shall store the compilation of collected information on a QMU shared drive and readily available to QMU staff on a

need-to-know basis containing:

- a. The original incident report;
 - b. Completed District Assignment form; and
 - c. Information and documents gathered during the Investigative Process.
4. The QMU shall consider all information and documentation obtained during the Investigative Process as confidential and privileged for use in conducting quality assurance activities and use by Division review committees, as well as the information obtained through the Division's Investigative Process, inclusive of the determination and any remediation, is protected from release or discovery under the following Arizona Revised Statutes §§ 36-441, 36-445, 36-445.01, 36-2401 through 36-2404, 36-2917, 36-2932(O) and 41-1959(C)(5).

Signature of Chief Medical Officer: 
[Anthony Dekker \(Nov 2, 2023 08:14 PDT\)](#)
Anthony Dekker, D.O.