

Shadowfax

Title	Individual Health or Behavior Emergency Policy
Policy Number	DAY.5002.000.000
Initiating Authority	Director, Day Supports
Approved By	Compliance Committee 10-20-21
Origin Date	September 7, 2021
Revision Date	
Effective Date	October 1, 2021
Next Review Date	July 2022
Associated Policies	
Associated Procedures	
Associated Documents	

I. POLICY STATEMENT

Shadowfax is committed to person-centered services, including rapidly and effectively responding to individuals' health emergencies and compassionately supporting individuals during an emotional and/or behavioral crisis; therefore, Shadowfax has created a policy regarding managing and responding to health and/or behavioral emergencies.

II. PURPOSE

This policy outlines standards for managing and responding to health and/or behavioral emergencies.

III. SCOPE

This policy applies to all individuals within the Day Supports (DAY) programs.

IV. GENERAL

This policy is based on the standards set by PA Code Title 55 Chapters 6100, 2380 and 2390.

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Note: The term "Individual" is synonymous with resident, client, patient, consumer, or participant.

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DEFINITIONS

- Individual Health Emergency: Any situation where an individual has an acute injury or illness which poses an immediate risk to the individual's life or long-term health.
- Behavior Emergency/Crisis: A behavior crisis is any situation in which an individual engages in actions which places the individual in danger of harm to themselves or others.

V. **POLICY**

DAY will create and maintain written procedures for responding to and managing individual health and/or behavioral emergencies. The objectives in handling health and/or behavioral emergencies are to:

- Respond in a timely, sensitive, and person-centered manner
- Protect the health and safety of the individual having the emergency
- Protect the health and safety of other individuals and staff who may be in the proximity of the emergency
- De-escalate behavioral emergencies, whenever possible, using methods of intervention less intrusive than restrictive procedures.

REPORTING

All requirements for managing and reporting incidents shall be followed including Incident Management and any county or other external reporting requirements, see ORG.1007.000.000 Incident Management. All internal reporting requirements must be followed, including, at a minimum:

- case notes
- service notes

RESTRICTIVE PROCEDURES

A restrictive procedure may only be used in the case of an emergency to prevent individuals from immediate physical harm to themselves or others, see DAY.5004.000.000 Restrictive and Positive Approaches.

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RESPONSIBILITIES

The Director, Day Supports, and/or the Director's designate(s) are responsible to:

- Arrange transportation through the use of agency vehicles, private vehicles, emergency vehicles or public transportation.
- Notify, where applicable, the responsible relative/guardian.

Notify the County Supports Coordinator and prepare a written report.

EMERGENCY PLANS AND INFORMATION

Each DAY Program Area shall have a written emergency medical plan listing the following:

1. The hospital or source of health care that will be used in an emergency.
2. The method of transportation to be used.
3. An emergency staffing plan.

For more information on emergencies see ORG.1005.000.000 Emergency Disaster Evacuations

Emergency information for an individual shall be easily accessible and include:

1. The name, address, telephone number and relationship of a designated person to be contacted in case of emergency.
2. The name, address, and telephone number of the individual's physician or source of health care.
3. The name, address and telephone number of the person able to give consent for emergency medical treatment, if applicable.
4. A copy of the individual's most recent annual physical examination.

VI. OVERSIGHT

Shadowfax's Compliance Committee or their designee(s) (the "Approved By") shall be in charge of the administration of this Policy. The Approved By responsibilities include:

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1. Identifying the action steps to come into compliance and directives to maintain compliance and implement the action steps.
2. Periodically reviewing this Policy and monitoring compliance to it.
3. Training responsible parties on their obligations under the Policy.

Revision History

Name	Date	Reason for Changes	Version