Emergency Safety Intervention Scenario Questionnaire

Review the following standards and answer the questions below:

2.11 An emergency safety intervention (ESI) plan may not be a component of a provider’s Behavior Management Plan. It is a plan for the manner in which staff will respond when the Behavior Management Plan is unsuccessful and a child escalates to a point that requires implementation of an emergency safety intervention.

2.14 Providers must have written policies for the use of any emergency safety interventions that will be authorized, a copy of which shall be provided to and discussed with each child and the child’s parents/or legal guardian prior to or at the time of admission. The policies and procedures must indicate whether any form of manual holds will be a part of that emergency safety intervention plan. Policies and Procedures for emergency safety interventions shall include:
   a. Provisions for documentation of an assessment at admission and at each annual exam by the child’s physician or authorized medical professional that there are no medical issues that would be incompatible with the appropriate use of emergency safety interventions on that child. Such assessment and documentation must be re-evaluated following any significant change in the child’s medical condition;
   b. Provisions for the documentation of each use of an emergency safety intervention including:
      i. Date and description of the precipitating incident;
      ii. Description of the de-escalation techniques used prior to the emergency safety intervention, if applicable;
      iii. Environmental considerations;
      iv. Names of staff participating in the emergency safety intervention;
      v. Any witnesses to the precipitating incident and subsequent intervention;
      vi. Exact emergency safety intervention used;
      vii. Documentation of the 15 minute interval visual monitoring of a child in seclusion;
      viii. Beginning and ending time of the intervention;
      ix. Outcome of the intervention;
      x. Description of any injury arising from the incident or intervention;
      xi. Summary of any medical care provided.

2.15 Policies and Procedures for emergency safety interventions shall include the following regarding manual holds:
   a. Provisions for prohibiting manual hold use by any employee not trained in prevention and use of emergency safety interventions;
   b. Provisions for assessing and monitoring the child’s behavior after an emergency safety intervention has been used;
   c. Provisions for reporting incidents of emergency safety interventions to the ORCC as required by the rules and regulations under which the provider is licensed;
d. Provision for review of emergency safety interventions by a staff member responsible for quality assurance and ensuring that staff are correctly using the interventions; 
e. Provision for the use of a manual hold with any child whose primary method of communication is sign language, allowing the child to have his/her hands free from restraint sufficiently during the intervention to communicate for brief periods except when such freedom may result in physical harm to the child or others.
f. Provisions that specify when manual holds are authorized to be used, which staff are authorized to use them, a description of the holds that are approved by the provider, the time limit allowed on any manual hold, and the policies on documenting the holds;
g. Provision for continuous monitoring during manual holds of the child’s breathing, verbal responsiveness, and motor control.

2.16 Policies and procedures for emergency safety interventions must include the following prohibitions:

   a. Manual holds may not be used to prevent runaways unless the child presents an imminent threat of physical harm to self or others or is specified in the child’s service plan;
   b. Manual holds shall not be used by staff that are not trained and authorized by the provider to utilize the manual holds or by staff that are unfamiliar with the child’s medical and psychological conditions;
   c. Children in care shall not be allowed to participate in emergency safety interventions of other children in care;
   d. Emergency safety interventions utilizing prone restraints require at least two trained staff members to carry out the hold;
   e. Emergency safety interventions shall not include the use of any restraint or manual hold that would potentially impair the child’s ability to breathe or has been determined to be inappropriate for use on a particular child due to a documented medical or psychological condition.
L.P. was involved in an argument earlier during the day with two other residents of the ACME Agency. The other two residents were D.M. and S.L. After S.L. threw ice all over L.P. from a cup sitting on the table, L.P. went back to her bedroom to get cleaned up. After she being in her room for approximately five or six minutes, the staff proceeded to go walk towards the child's bedroom to check on her to make sure that she was okay. As the staff approached the bedroom, they noticed that the bedroom had been trashed and items were thrown all over the place. The staff found L.P. standing in the bathroom with a small object that appeared to be glass in her hand. Staff noticed that L.P. was cutting herself her arm with the piece of glass. When asked by the staff to give them the glass, L.P. refused. Staff asked L.P. for the object several times. L.P refused each time. And, when the staff member tried to take the glass away from the child, she placed the glass in her mouth and tried to swallow it. A third staff member came in the bedroom to assist, but neither staff member was able to take away the glass object from the child. L.P. became violent and destructive at that point.

Is this incident a reportable significant event?

How much time do you have to document this event into GA+SCORE?

How would you categorize this event in GA+SCORE?

Does this incident require an Emergency Safety Intervention? If yes, please explain the reason for the Emergency Safety Intervention?
What does your agency’s policies and procedures state regarding the use of Emergency Safety Interventions?

What would be your agency’s response or actions to this incident?

Who would they notify?
What would be a suitable Corrective Action Plan for this incident?

Supervisor’s Name_____________________________ Date____________________

Staff Name _________________________________ Date ______________________