

Incident/Sentinel Event Notification For Department of Education Contracted Providers

Instructions

Purpose of Form:

To be used to notify the appropriate principal, agency and District Educational Specialist when there are occurrences involving serious physical/psychological harm or risk to a student, provider reports are late or not received, provider has not rendered services/gaps in services, or any incident of noncompliance with Service Activities as specified in the IEP/MP(s).

Triggers:

- | | |
|-----------------------------|---|
| *Harm or risk to student(s) | *Missing reports |
| *Late reports | *Alleged fraud claims/discrepancy in billing claims |
| *Lack of professionalism | *Questionable use of best practices application |
| *Ethics questions | *Key deliverables not rendered |
| *System concerns | |

Routing Procedures:

- 1 Sentinel Events require immediate action and notification to the School Principal to minimize harm or risk to the student, in addition to the submittal of written Incident/Sentinel Notification. An appropriate, individualized plan of action shall be discussed, developed and implemented to ensure student safety.
- 2 Agency/School personnel should try to resolve any complaints/issues with the individual provider, school, or agency. Staff shall keep formal documentation on all actions/communication.
- 3 If personnel cannot resolve the complaints/issues, then the appropriate District Educational Specialist shall be contacted for assistance. The DES shall keep formal documentation on all actions/communications, review, analysis, and follow-up. The DES is also responsible to send a copy of the Incident/Sentinel Notification form to the State Office SPED Administrator for statewide review and analysis.
- 4 If contract complaints/issues cannot be resolved, then the DES shall forward all documentation to the appropriate District Contract Specialist for formal resolution with the school/provider agency. The Contract Specialist will work to resolve complain/issue.

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For Department of Education Contracted Providers**

Check all that apply:

- Sentinel events: Occurrences involving serious physical/psychological harm or risk there of ***
- Provider reports are late or not received** **Services not rendered**
- Non-compliance with Contract/MP/IEP** **System concerns: Interagency disagreements; gaps**
- Other** _____

Re: Agency/School: _____

Describe the incident/concerns:

Describe actions taken by school personnel/provider to resolve the concern:

Describe proposed resolution:

Describe/attach copies of pertinent documentation:

Send Notification to:

- Parent (*required for Sentinel Event)** **School Principal** **Agency, if applicable**
- District Educational Specialist (Name)** _____

Please Indicate: **FYI, No further action requested** **Further Action Requested**

Submitted by: _____

Print Name

Title

School/Agency

Signature

Date

To be completed by the District Educational Specialist

Action taken by the DES (if requested):

Send Follow-Up Notification to:

- Referral Originator** _____
Date
- Agency/School, as applicable** _____
Specify to Whom Date
- SPED Administrator (REQUIRED)** _____
Date

Completed by:

_____/_____/_____/_____
Print Name Title Signature Date