Arizona Department of Health Services
Division of Licensing, Office of Long Term Care Licensing

FEDERAL AND ARIZONA STATE REPORTING REQUIREMENTS
NURSING FACILITIES AND SKILLED NURSING FACILITIES

Phoenix Office
Office of Long Term Care Licensing
150 North 18th Avenues, Suite 440
Phoenix, Arizona 85007
602-364-2690

The after-hours incident reporting phone number is: 602-364-2677

The following rules and regulations identify Arizona State and Federal reporting requirements, ADHS and Federal definitions, and interpretations.

Arizona State:

R9-10-E.2.b. – An allegation of abuse of a resident or misappropriation of a resident's property is reported to the department within 5 calendar days of the investigation. (See * below)**

R9-10-904.E.7. Injuries of unknown source that require medical services, disasters, or incidents must be reported within 24 hours or first business day after the injury, disaster, or incident. (See * below)**

Federal:

F225, §483.13(c)(2) The facility must ensure all alleged violations involving mistreatment, neglect, or abuse, including injuries of unknown source, and misappropriation of resident property are reported immediately to the administrator of the facility and to other officials in accordance with state law through established procedures (including to the state survey and certification agency).

F225, §483.13(c)(4) The results of all investigations must be reported to the administrator or his designated representative and to other officials in accordance with state law (including to the state survey and certification agency) within 5 working days of the incident, and if the alleged violation is verified appropriate corrective action must be taken.

(***) Per CMS S&C-05-09 dated December 16, 2004:

***Immediately*: per CMS means as soon as possible but ought not to exceed 24 hours after discovery of the Incident. "As such, states may not eliminate the obligation for any of the above violations (i.e., mistreatment, neglect, abuse, injuries of unknown source, and misappropriation of resident property) to be reported, nor can the state establish longer time frames for reporting than mandated in the regulations…".**

Nursing homes must comply with requirements for participation, including reporting requirements set out in 42 C.F.R. §§483.13(c)(2) and (4). *No state law can override the obligation of a nursing home to fulfill the requirements under 42 C.F.R. §483.13(c), as long as Medicare/Medicaid certification is in place.*

Pertinent definitions:

- ***Neglect*** **(Federal) – Failure to provide goods and services necessary to avoid physical harm, mental anguish, or mental illness (42 C.F.R. §488.301).**

- ***Abuse*** **(Federal) – The willful infliction of injury, unreasonable confinement, intimidation, or punishment with resulting physical harm, pain or mental anguish (42 C.F.R. §488.301).**
- ***Abuse*** **(State) – (a) intentional infliction of physical harm, (b) injury caused by negligent acts or omissions, (c) unreasonable confinement, (d) sexual abuse or sexual assault (A.R.S.§46-451).**

- ***Abuse*** **(State) (Vulnerable Adult Abuse) includes emotional abuse which is defined as a pattern of ridiculing or demeaning a vulnerable adult, making derogatory remarks to a vulnerable adult, verbally harassing a vulnerable adult or threatening to inflict physical or emotional harm on a vulnerable adult (A.R.S.§13-3623).**

- ***Injuries of unknown source*** **(Federal) – An injury should be classified as an "injury of unknown source" when both of the following conditions are met:**
  - **The source of the injury was not observed by any person or the source of the injury could not be explained by the resident; and**
  - **The injury is suspicious because of the extent of the injury or the location of the injury (e.g., the injury is located in an area not generally vulnerable to trauma) or the number of injuries observed at one particular point in time or the incidence of injuries over time.**

- ***Misappropriation of resident property*** **(Federal) – The deliberate misplacement, exploitation, or wrongful, temporary or permanent use of a resident's belongings or money without the resident's consent (42 C.F.R. §488.301).**

- ***Disaster*** **(State) – unexpected adverse occurrence that affects the nursing care institution's ability to provide nursing care institution services.**

- ***Incident*** **(State) – unexpected occurrence that poses a threat to the health and safety of residents. The following are considered "incidents" by the Office of LTC Licensing:**
  - **Elopements (unsupervised and unauthorized)**
  - **Deaths (unexpected, or as a direct result of an injury)**
  - **Significant Medication errors that have the ability to jeopardize a resident's health**
  - **Outbreaks of illness or infection.**

Based on a study conducted on incidents self-reported over a six month period in 2008, it has been determined that facilities no longer need to report resident falls with injuries (as incidents) unless they meet the criteria for injuries of unknown source (refer to Federal definition above), or the fall was reported to have been caused by staff neglect. In such a case, the facility would be asked to investigate the neglect, not the fall.

Clarification: Medical services (diagnostic tests, ER transfers, first aid) provided to residents to rule out injury or to address injury are not reportable on their own, only in cases of injuries of unknown origin or unknown source.

PLEASE NOTE: Reporting unusual occurrences to the Office of Long Term Care does not relieve the facility from reporting requirements of other agencies.

If a determination is made that an event is not reportable to the Office of Long Term Care, this does not relieve the facility of its responsibility to investigate and take appropriate action.

Updated: August 2008