

North Sound Behavioral Health Organization

Section 1000 – Administrative: Critical Incident Reporting and Review Requirements Quality Assurance and Improvement Process

Authorizing Source: DBHR/North Sound BHO Contracts; WAC 388-877-0420; RCW 43.70.510

Cancels:

See Also:

Providers must comply with this policy & may develop individualized implementation guidelines as needed

Responsible Staff: Deputy Director

Approved by: Executive Director

Date: 12/19/2016

Signature:

POLICY #1009.00

SUBJECT: CRITICAL INCIDENT REPORTING AND REVIEW REQUIREMENTS QUALITY ASSURANCE AND IMPROVEMENT PROCESS

PURPOSE

This policy describes:

1. The processes, circumstances, methods and timelines by which Behavioral Health Agencies (BHAs) in the North Sound Region must provide information to North Sound Behavioral Health Organization (North Sound BHO);
2. The processes, circumstances, methods and timelines by which North Sound BHO must provide information to the Division of Behavioral Health and Recovery (DBHR);
3. The quality assurance and improvement activities involved in reporting and responding to critical incidents affecting individuals of the North Sound BHO Region and North Sound BHO contracted BHAs;
4. The purpose of the Critical Incident Reporting and Review Requirements and the North Sound BHO Critical Incident Review Committee (CIRC) quality improvement and assurance process is to:
 - a. Ensure, in its ongoing commitment to quality assurance and improvement initiatives, North Sound BHO promotes individual safety and risk reduction by requiring the recognition and reporting of critical incidents. Specifically the North Sound BHO wants to ensure:
 - i. Care and services delivered meet the requirements of DBHR/North Sound BHO and North Sound BHO/BHA contracts, North Sound BHO Clinical Eligibility and Care Standards (CECS), relevant Washington Administrative Codes (WAC), the Revised Codes of Washington (RCW) and the Code of Federal Regulations (CFR). There is a timely and systematic reporting mechanism that promotes appropriate responses to critical incidents; and
 - ii. A framework, structure and set of guidelines for the timely reporting of critical incidents exist as defined by DBHR.
 - b. Support and protect the reporting and documentation of critical incidents under North Sound BHO Coordinated Quality Improvement Program (CQIP). North Sound BHO maintains CQIP status through the Washington State Department of Health (DOH); and
 - c. Communicate with the DOH for the purpose of improvement of the quality of health care services rendered to individuals and the identification and prevention of medical malpractice as set forth in RCW 43.70.510; and
 - d. Encourage the development of a system-wide recovery-oriented culture, which minimizes individual blame or retribution for involvement in critical incidents and emphasizes accountability, trust, system improvement and continuous learning.

POLICY

The North Sound BHO appoints and supports a designated incident reporter (DIR) whose role is to:

1. Screen critical incident (CI) reports for appropriateness; and
2. Report CI to DBHR; and
3. Facilitate Critical Incident Review Committee (CIRC) which investigates CI; and
4. Follow-up with each review/investigation until a disposition is reached for each; and
5. Report investigation and follow-up activities, as well as, dispositions to DBHR; and
6. Prepare and deliver an annual report of activities to North Sound BHO Internal Quality Management Committee (IQMC) and other stakeholders.

All types of CI shall be reported to DBHR using DBHR's Behavioral Health and Recovery Incident Reporting System. If the Incident Reporting System is unavailable for use, a standardized form will be provided by DBHR with instructions.

PROCEDURE

CI Reporting: BHAs shall report CI to North Sound BHO and North Sound BHO shall report CI to DBHR in accordance with the requirements found in the CI categories, types, reporting parameters and operational definitions delineated below.

All North Sound BHO CI reports to DBHR will include:

1. Description of the incident;
2. Date and time of the incident;
3. Incident location;
4. Incident type;
5. Names and ages, if known, of all individuals involved in the incident; and
6. Nature of each individual's involvement in the incident:
 - a. Service history with North Sound BHO, if any, of the individual(s) involved;
 - b. Steps taken by North Sound BHO to minimize further loss or harm; and
 - c. Any legally required notifications made by North Sound BHO.

CATEGORY I Incidents

1. BHAs shall notify North Sound BHO DIR immediately after becoming aware of a Category I incident, then follow-up with a same-day written report. Notifications and reports shall be sent to the following email address: ci@northsoundbho.org;
2. North Sound BHO DIR shall notify DBHR Incident Manager immediately after becoming aware of a Category I incident and follow-up with a same-day written report; and
3. North Sound BHO shall investigate and report Category I incidents that involve individuals who were served by a North Sound BHA within 365 days of the incident.
 - a. **Any Death or serious injury of individuals, staff, or public citizen:** *Deaths and serious injuries that occur at a DBHR facility, or a facility that DBHR licenses, contracts with, and certifies. Serious injuries include any permanent injury or one that requires admission to a hospital.*
 - b. **Unauthorized leave (UL) of a mentally ill offender or sexually violent offender:** *Incidents where a UL involves a mentally ill offender or a sexually violent offender that occurs from a Behavioral Health Facility or a Secure Community Transition Facility, which includes Evaluation and Treatment Centers (E&T) or Crisis Stabilization Units (CSU) and Triage Facilities that accept involuntary individuals.*

- c. **Violent act:** *Any alleged or substantiated non-fatal injuries, rape, sexual assault, homicide, attempted homicide, arson, or substantial property damage (> \$100,000.00), committed by an individual and any other violent act as defined by RCW 71.05.020 and 9.94A.030.0.*
- d. **Any event involving an individual or staff that has attracted media attention.**
- e. **A bomb threat.**

CATEGORY II Incidents:

- 1. BHAs shall report all Category II incidents within one (1) business day of becoming aware of the incident. No prior notification (e.g. email or phone) is required by reporting BHAs or North Sound BHO.
- 2. North Sound BHO DIR shall report all Category II incidents to DBHR within one (1) business day of becoming aware of Category II incidents.

For the purpose of reporting Category II incidents, individuals are defined by the following:

- a. Outpatient individuals are: those who have received an initial assessment and meet eligibility criteria for behavioral health outpatient services. These individuals are considered outpatient individuals until their outpatient services are completed.
 - b. Residential individuals are: those who have received an initial assessment and meet eligibility criteria for substance use disorder residential services. These individuals are considered residential individuals until their residential services are completed.
 - c. Crisis services individuals are: currently being served by Crisis personnel and remain so until their crisis services are completed and/or they have begun receiving services at another level of care.
 - d. Jail services individuals are: those who have received an initial assessment and meet eligibility criteria for behavioral health jail services. These individuals are considered jail service individuals and remain so for up to 90 days post-release and/or they have begun receiving services at another level of care.
3. Category II Incidents include the following types:
- a. Alleged individual abuse or neglect of a serious or emergency nature by an employee, volunteer, licensee, contractor, or another individual receiving service. The willful action or inaction that inflicts injury, unreasonable confinement, intimidation, punishment on, or abandonment of an individual receiving services by a DBHR employee, volunteer, licensee, contractor, or another individual.
 - b. A substantial threat to facility operation or individual safety resulting from a natural disaster. These may include: earthquake, volcano eruption, tsunami, urban fire, flood, or an outbreak of communicable disease, etc.
 - c. Any breach or loss, including theft, of an individual's Personal Health Information (PHI) such as: a missing or stolen computer, or a missing or stolen computer disc or flash drive is considered as reportable in accordance with the Health Insurance Portability and Accountability Act (HIPAA) must be reported as directed by DBHR and BHO agreement on General Terms and Conditions, the HIPAA compliance section and Breach Notification subsection. In addition to the standard elements of an incident report, the BHA and North Sound BHO DIR will document and/or attach:
 - i. Police report (when information is stolen);
 - ii. Any equipment that was lost; and
 - iii. Specifics of the individual information.

A letter of notification shall be sent to each individual whose information was breached. This notification shall occur without unreasonable delay and in no case later than 60 days after discovery of the breach.

- d. Allegation of financial exploitation (FE) involving an agency, an individual, or other as defined by RCW 74.34.020:

Financial exploitation means the illegal or improper use, control over, or withholding of the property, income, resources, or trust funds of the vulnerable adult by any person or entity for any individuals' or entity's profit or advantage other than for the vulnerable adult's profit or advantage. "Financial exploitation" includes, but is not limited to:

- i. Use of deception, intimidation, or undue influence by a person or entity in a position of trust and confidence with a vulnerable adult to obtain or use the property, income, resources, or trust funds of the vulnerable adult for the benefit of a person or entity other than the vulnerable adult;*
 - ii. Breach of a fiduciary duty, including, but not limited to: the misuse of a power of attorney, trust, or guardianship appointment, that results in the unauthorized appropriation, sale, or transfer of the property, income, resources, or trust funds of the vulnerable adult for the benefit of a person or entity other than the vulnerable adult; or*
 - iii. Obtaining or using a vulnerable adult's property, income, resources, or trust funds without lawful authority, by a person or entity that knows or clearly should know the vulnerable adult lacks the capacity to consent to the release or use of his or her property, income, resources, or trust funds.*
- e. **Suicide attempts requiring medical care:** *suicide attempts that occur at a DBHR facility or a facility that DBHR licenses, contracts with, and certifies.*
 - f. **Any potential media event regarding an individual receiving services or regarding a staff member or owner(s) of the agency.**
 - g. **Any event involving a credible threat towards a staff member that occurs at a DBHR facility, a facility DBHR licenses, contracts with, or certifies; or a similar event that occurs within the community.** *A credible threat towards staff is defined as "A communicated intent (veiled or direct) in either words or actions of intent to cause bodily harm and/or personal property damage to a staff member or a staff member's family, which resulted in a report to Law Enforcement, Restraining/Protection order, or workplace safety/personal protection plan.*
 - h. **Any incident that was referred to the Medicaid Fraud Control Unit by North Sound BHO or one (1) of its contracted BHAs.**
 - i. **A life safety event that requires an evacuation or is a substantial disruption to the facility.**

Note: *In addition to the categories described above, North Sound BHO DIR will utilize professional judgment and report incidents that fall outside the scope of these sections.*

BHA CI reports to North Sound BHO shall include:

1. Description of the incident;
2. Date and time of the incident;
3. Incident location; city if known. County, if city is not known.
4. Incident type;
5. Name and age (if known) of each individual involved in the incident;
6. Service history with North Sound BHO BHAs, if any, of the individuals involved;
7. Immediate actions taken by the BHA to minimize further loss or harm;
8. Future actions planned by the BHA to prevent the type of incident from occurring again, with the individual involved and/or others; and,
9. Any legally required notifications made by the BHA.

Critical Incident Reporting

1. BHAs attach a PDF of the completed North Sound BHO CI form (available online at www.northsoundbho.org/forms/index.asp) and send it in an encrypted email to: ci@northsoundbho.org.

2. North Sound BHO DIR or designee will utilize the Behavioral Health and Recovery Incident Reporting System. If the Incident Reporting System is unavailable for use, a standardized form will be provided by DBHR with instructions.
3. BHAs shall submit any additional information necessary to understanding the incident to North Sound BHO via an encrypted email to: ci@northsoundbho.org as it becomes known. North Sound BHO DIR shall forward this additional information to DBHR Incident Manager in an encrypted email as appropriate.
4. Additional reporting and review requirements for DBHR reportable CIs for North Sound BHO DIR:
 - a. Notify County Coordinators and North Sound BHO Board Chair via a redacted copy of the DBHR CI report, and
 - b. North Sound BHO Executive Director, Deputy Director and their designees via email. Notification shall occur within one (1) business day of North Sound BHO's receipt of the BHA CI report.
5. DBHR may require North Sound BHO DIR to report and initiate an investigation that has not yet been reported by a North Sound BHO BHA.
6. North Sound DIR will fully cooperate with any investigation initiated by DBHR and provide any information requested by DBHR within the timeframes specified within the request.
 - a. If North Sound BHO DIR does not respond according to the timeframe in DBHR's request, DBHR may obtain information directly from any involved party and request their assistance in the investigation.
 - b. DBHR may request medication management information.
 - c. DBHR may also investigate or may require CIRC to investigate incidents that involved individuals who have received services from a North Sound BHO BHA more than 365 days prior to the incident.

Critical Incident Investigation Requirements & Quality Improvement Process

1. North Sound BHO maintains a CIRC whose purpose is to review all CI submitted. North Sound BHO CIRC membership will include:
 - a. North Sound BHO Clinical Oversight Quality Specialist with expertise in adult services who serves as the DIR;
 - b. North Sound BHO Clinical Oversight Quality Specialist with expertise in child/youth services;
 - c. North Sound support staff member; and
 - d. North Sound BHO Medical Director.
2. CIRC will meet regularly to review all CI reports, request written follow-up reports from BHAs, investigate CIs utilizing internal selective reviews and make quality improvement recommendations related to CIs to North Sound BHO Quality Management Oversight Committee (QMOC), North Sound BHO IQMC, and/or the Clinical Oversight Team for further appropriate action.
3. During the regularly scheduled CIRC meeting, North Sound BHO DIR shall facilitate review and discussion of each new CI and CIs from previous months on which the committee determined further review was required before proper disposition of the case could be determined.
4. During a CIRC review, the committee members shall address each incident in the following context:
 - a. Does the description of the CI and/or subsequent information warrant concern about quality or appropriateness of care delivered by the BHA?

- b. Does the incident report indicate appropriate action was taken immediately after the incident to lessen or prevent individual loss or harm?
 - c. Does the incident report indicate an appropriate plan for future action has been made to decrease the likelihood of this type of incident occurring again?
 - d. Can/should any further action be pursued by North Sound BHO or the BHA?
5. North Sound BHO may deem further action is warranted in the case of a particular CI or group of incidents. Actions may include, but are not limited to:
- a. North Sound BHO selective review;
 - b. Request for a BHA internal case review;
 - c. Request for copies of parts of or complete medical records;
 - d. Request for special meetings or quality initiatives (e.g., Root Cause Analysis) regarding quality concerns involved;
 - e. Request for BHA initiated quality assurance and improvement activities based on incidents or groups or types of incidents; or
 - f. Other requests as deemed necessary.
6. Incident Review and Follow-up: CIRC will review and follow-up on all incidents reported. CIRC will provide sufficient information, review and follow-up to take the process and report to its completion. A CI will not be categorized as complete until the following information is provided:
- a. Summary of any incident debriefings or review process dispositions;
 - b. Present physical location of the individual if known. If the individual cannot be located, the DIR will document the steps the BHA took to attempt to locate the individual by using available local resources;
 - c. Documentation of whether the individual is receiving or not receiving services from the BHA at the time the incident is being closed;
 - d. In the case of a death of the individual, the BHA must provide either a telephonic verification from an official source or via a death certificate.
 - i. In the case of a telephonic verification, the BHA will document the date of the contact and both the name and official duty title of the person verifying the information.
 - ii. If this information is unavailable, the attempt to retrieve it will be documented.
 - e. Actions taken as a result of the occurrence, results of said actions, additional actions that are planned in the future and efforts that have been undertaken and designed to lessen the potential for recurrence shall be reported to CIRC within 21 days of becoming available.
 - f. Additionally, the BHA ensures all plans for corrective action following a review or investigation are implemented for quality assurance and improvement and incorporated into all administrative areas, as necessary, for quality assurance and improvement.
 - g. When CIRC members reach a consensus, the CI report and any follow-up information answer the preceding questions satisfactorily, the incident is considered “closed”.
 - h. CIRC will develop an annual summary report and data analysis each January. Copies of the annual report will be distributed and/or presented to North Sound BHO IQMC, QMOC and other stakeholders deemed appropriate by IQMC.

ATTACHMENTS

None