



SALISH BH-ASO POLICIES AND PROCEDURES

Policy Name: CRITICAL INCIDENT REPORTING

Policy Number: CP302

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Policy

The Salish Behavioral Health Administrative Services Organization (SBH-ASO) maintains a Critical Incident Management System consistent with all applicable laws and shall include policies and procedures for identification of incidents, reporting protocols, and oversight responsibilities.

The SBH-ASO has a Critical Incident Manager responsible for administering the Critical Incident Management System and ensuring compliance with the requirements of the contract with the Health Care Authority (HCA). The Critical Incident Manager is the SBH-ASO Administrator.

The SBH-ASO shall communicate with the appropriate MCO when the SBH-ASO becomes aware of an incident for a Medicaid Enrollee. Upon request, SBH-ASO will collaborate with the appropriate MCO in reference to such an incident.

Procedure

SBH-ASO staff, subcontractors, Federally Qualified Health Centers (FQHC), and independent behavioral health providers (Reporters) are to report Critical Incidents involving Individuals receiving SBH-ASO funded services via the SBH-ASO Critical Incident Form:

<https://www.cognitofrms.com/SalishBehavioralHealthOrganization1/SBHASOCriticalIncidentForm>

Reporters shall submit to the SBH-ASO and the SBH-ASO shall submit to the HCA an Individual Critical Incident report for the following Level 1 incidents that occur:

1. To an Individual receiving SBH-ASO funded services, and occurred within a contracted behavioral health facility (inpatient psychiatric, behavioral health agencies), FQHC, or by independent behavioral health provider:
 - a. Abuse, neglect, or sexual/financial exploitation; and

- b. Death.
2. By an Individual receiving SBH-ASO funded services, with a behavioral health diagnosis, or history of behavioral health treatment within the previous 365 days. Acts allegedly committed, to include:
 - a. Homicide or attempted homicide;
 - b. Arson;
 - c. Assault or action resulting in serious bodily harm which has the potential to cause prolonged disability or death;
 - d. Kidnapping; and
 - e. Sexual assault.
3. Unauthorized leave from a behavioral health facility during an involuntary detention, when funded by the SBH-ASO.
4. Any event involving an Individual that has attracted, or is likely to attract media coverage, when funded by the SBH-ASO (the SBH-ASO shall provide the link of the source of the media to HCA, as available).

Reporters shall also submit to the SBH-ASO the following Level 2 incidents involving Individuals receiving SH-ASO funded services:

1. Incidents posing a credible threat to an Individual's safety
2. Suicide and attempted suicide
3. Poisoning/overdoses, unintentional or intention unknown

Reporting

1. The SBH-ASO will document and track all Critical Incidents received. This log will include the current open or closed status of the Critical Incident and will be used for required reporting.
2. The SBH-ASO shall report Critical Incidents within one (1) business day of becoming aware of the incident and shall report incidents that have occurred within the last thirty (30) calendar days, with the exception of incidents that have resulted in or are likely to attract media coverage. Media related incidents should be reported to HCA as soon as possible, not to exceed one (1) business day.
3. The SBH-ASO shall report Critical Incidents, follow-up, and actions taken using the HCA Incident Reporting System at <https://fortress.wa.gov/hca/ics/> using the report template within the system. If the system is unavailable the SBH-ASO shall report Critical Incidents to HCABHASO@hca.wa.gov.
 - a. HCA may ask for additional information as required for further research and reporting. SBH-ASO shall provide information within three (3) Business Days of HCA's request.
4. The SBH-ASO Internal Quality Committee (IQC) will regularly review the status of each open Critical Incident to ensure follow-up investigations and procedure are occurring within contractual time frames and within contractual procedures. General trends will be reviewed at the Quality Assurance and Compliance

Committee (QACC). Both committees should consider any actions that can be taken to reduce incidents and follow-up as necessary.

5. The SBH-ASO shall submit a semi-annual report of all Critical Incidents tracked for Individuals receiving SBH-ASO funded services during the previous six (6) months.
 - a. At minimum, the report shall include an analysis of the following incidents:
 - i. Incidents identified through the HCA Incident Reporting System;
 - ii. Incidents posing a credible threat to an Individual's safety;
 - iii. Suicide and attempted suicide; and
 - iv. Poisoning/overdoses, unintentional or intention unknown.
 - b. The following elements shall be included in the analysis:
 - i. How the incident reporting program has been structured and operationalized;
 - ii. The number and types of Critical Incidents and comparisons over time;
 - iii. Trends found in the population (e.g., regional differences, demographic groups, vulnerable population, and other trends the SBH-ASO IQC or QACC deem necessary for additional review).
 - iv. Actions taken by the SBH-ASO to reduce incidents based on the analysis, and other actions taken and why;
 - v. The SBH-ASO's evaluation of how effective our Critical Incident reporting program has been over the reporting period and changes that will be made, as needed.
 - c. The report shall be submitted as a Word document and is due no later than the last business day of January and July for the prior six (6) month period. The January report shall reflect incidents that occurred July through December and the July report shall reflect incidents that occurred January through June.
 - d. The SBH-ASO shall also include a data file of all Critical Incidents from which the analysis is made using a template provided by HCA.