



CRITICAL INCIDENT REPORTING POLICY

DEPARTMENT OF HUMAN SERVICES
MEDICAL SERVICES DIVISION - MFP
DN 533 (8-2008)

General Definition

A "Critical Incident" is any actual or alleged event or situation that creates a significant risk of substantial or serious harm to the physical or mental health, safety or well being of a waiver participant.

Reportable Critical Incidents Defined

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| 1. Abuse | 7. Death |
| 2. Neglect | 8. Medical Emergency |
| 3. Exploitation | 9. Restraints |
| 4. Rights Violations | 10. Medical Errors |
| 5. Serious Injury | 11. Law Enforcement Contact |
| 6. Missing Person | 12. Suicide Attempt |

Who is supposed to report a critical incident?

Any person who becomes aware of a critical incident as defined on this form. Qualified Service Providers that are enrolled with the Department of Humans Services, Transition Coordinators, and Case Managers are required to report incidents

How do you report a critical incident?

Individuals wishing to report an incident can contact any of the following persons:

- Transition Coordinator: Name _____
Agency _____
Address _____
Phone Number _____
- Case Manager: Name _____
Agency _____
Address _____
Phone Number _____
- Money Follows the Person Grant Manager: Jake Reuter, Department of Humans Services, Medical Services, Department 325, 600 East Boulevard Ave, Bismarck, ND 58505, 1-800-755-2604.

Reporting Process

The critical incidents report form (SFN 536) will be completed by either the Transitional Coordinator, Case Manager, or the Money Follows the Persons Grant Program Manager. Action will be taken to resolve the concerns and a follow-up plan will be developed.



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Critical Incidents

1. Abuse

- a. Willful use of offensive, abusive, or demeaning language by a caretaker that causes mental anguish of any person with developmental disabilities;
- b. Knowing, reckless, or intentional acts or failures to act which cause injury or death to a developmentally disabled or mentally ill person or which placed that person at risk of injury or death;
- c. Rape or sexual assault of a developmentally disabled or mentally ill person;
- d. Corporal punishment or striking of a developmentally disabled or mentally ill person;
- e. Unauthorized use or the use of excessive force in the placement of bodily restraints on a developmentally disabled or mentally ill person; and
- f. Use of bodily or chemical restraints on a developmentally disabled or mentally ill person which is not in compliance with federal or state laws and administrative regulations.

2. Exploitation

An act committed by a caretaker or relative of, or any person in a fiduciary relationship with, a person with a disability, means:

- a. The taking or misuse of property or resources of a person with developmental disabilities or mental illness by means of undue influence, breach of fiduciary relationship, deception, harassment, criminal coercion, theft, or other unlawful or improper means;
- b. The use of the services of a person with developmental disabilities or mental illness without just compensation; or
- c. The use of a person with developmental disabilities or mental illness for the entertainment or sexual gratification of others under circumstances that cause degradation, humiliation, or mental anguish to the person with developmental disabilities or mental illness.

3. Neglect

- a. Inability of a person with disabilities to provide food, shelter, clothing, health care, or services necessary to maintain the mental and physical health of that person;
- b. Failure by any caretaker of a person with developmental disabilities or mental illness to meet, either by commission or omission, any statutory obligation, court order, administrative rule or regulation, policy, procedure, or minimally accepted standard for care of persons with developmental disabilities or mental illnesses;



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- c. Negligent act or omission by any caretaker which causes injury or death to a person with developmental disabilities or mental illness or which places that person at risk of injury or death;
- d. Failure by any caretaker, who is required by law or administrative rule, to establish or carry out an appropriate individual program or treatment plan for a person with developmental disabilities or mental illness;
- e. Failure by any caretaker to provide adequate nutrition, clothing, or health care to a person with developmental disabilities or mental illness;
- f. Failure by any caretaker to provide a safe environment for a person with developmental disabilities or mental illness; and
- g. Failure by any caretaker to provide adequate numbers of appropriately trained staff in its provision of care and services for persons with developmental disabilities or mental illnesses.

4. Rights Violations

Through omission or commission, the failure to comply with the rights to which an individual with a disability is entitled as established by law, rule, regulation, or policy.

5. Serious Injury

Reported, regardless of the cause or setting in which it occurred, when an individual sustains:

- A fracture
- A dislocation of any joint
- An internal injury
- A contusion larger than 2.5 inches in diameter
- Any other injury determined to be serious by a physician, physician assistant, registered nurse, licensed vocational nurse/licensed practical nurse.

6. Missing Person

Whenever there is police contact regarding a missing person regardless of the amount of time the person was missing. Reporting should occur:

- During a period of time in which a program provider is responsible for supervision of program participant/consumer.
- Not During a period of time in which a program provider is responsible for supervision of program participant/consumer.



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7. Death

The death of an individual is reported, regardless of the cause or setting in which it occurred.

- During a period of time in which a program provider is responsible for supervision of program participant/consumer.
- Not During a period of time in which a program provider is responsible for supervision of program participant/consumer.

8. Medical & Psychiatric Emergency

Admission of an individual to a hospital or psychiatric facility or the provision of emergency medical services (treatment by EMS) that results in medical care which is unanticipated and/or unscheduled for the individual and which would not routinely be provided by a primary care provider.

Use Of:

- Emergency Medical Services (example*: emergency room care)
- Emergency Psychiatric Services (example*: mental health facility admission)
- Life Saving Intervention (example*: Heimlich, CPR)

* Examples are just one of several possible scenarios

9. Restraints

Every time an individual is restrained, it is:

- Personal (the application of pressure, except physical guidance or prompting of brief duration, that restricts the free movement of part or all of an individual's body).
- Mechanical (the use of a device that restricts the free movement of part or all of an individual's body. Such device includes an anklet, a wristlet, a camisole, a helmet with fasteners, a muff with fasteners, a mitt with fasteners, a posey, a waist strap, a head strap, and restraining sheet. Such a device does not include one used to provide support for functional body position or proper balance, such as a wheelchair belt or one used for medical treatment, such as a helmet used to prevent injury during a seizure.) It also means to cause a device that allows for free movement to be useable. Such as locking a wheelchair or not allowing an individual access to technology.



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- Chemical (the use of a chemical, including a pharmaceutical, through topical application, oral administration, injection, or other means to control an individual's activity and which is not a standard treatment for the individual's medical or psychiatric condition).
- Included In A Written And Approved Behavior Plan.
- Not Included In a Written and Approved Behavior Plan.
- Seclusion: involuntary confinement in a room that the person is physically prevented from leaving.
- Isolation: forced separation or failure to include the person in the social surroundings of the setting or community.

10. Medication Discrepancy

When there is a discrepancy between what a physician prescribes and what an individual actually takes and the individual self-administers medication under supervision of the Program Provider or has medication administered by the Program Provider. A medication discrepancy is when one or more of the following occurs:

- a. Wrong medication: an individual takes medication that is not prescribed for that individual. This includes taking medication after it has been discontinued or taking the incorrect medication because it was improperly labeled.
- b. Wrong dose: An individual takes a dose of medication other than the dose that was prescribed.
- c. Omitted dose: An individual does not take a prescribed dose of medication within the 24-hour period of a calendar day. An omitted dose does not include an individual's refusal to take medication.
- d. Dose Refused: An individual's refusal to take medication resulting in a medical emergency or use of restraint

11. Law Enforcement Contact

A person receiving services is charged with a crime or is the subject of a police investigation, which may lead to criminal charges; an individual is a victim of a crime against the person; crisis intervention involving police or law enforcement personnel.



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Suicide Attempt

The intentional attempt to take one's own life. A suicide attempt is limited to the actual occurrence of an act and does not include verbal suicidal threats by a person receiving services.

Review

Critical Incident reports will be completed by the Transition Coordinator or the HCBS Case Manger and forwarded to the MFP Grant Program Administrator for processing. MFP Administrator will respond to each incident based on need and significance. Copies of all incident reports will be maintained in the MFP participants file and reviewed as part of the MFP Quality Assurance process.

Developmental Disabilities Community providers use an agency specific incident reporting document that addresses each of the ten critical incidents defined above. Critical incidents are reviewed by the Developmental Disabilities Division.