# Great Rivers Behavioral Health Administrative Services Organization

Policy Title: Critical Incident Reporting Policy No. 4011.01

Category: Contract Compliance Date Adopted: 03/13/2020

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Reference: Washington Health Care Authority (HCA) Contract with Great Rivers Behavioral

Health Administrative Services, and Managed Care Organizations

Washington Administrative Code 182-538D, 246-341

## Policy:

- 1.1. Great Rivers Behavioral Health Administrative Services Organization (Great Rivers BH-ASO) shall follow the Critical Incident Reporting Requirements outlined in the Great Rivers BH-ASO contracts with the Washington State Health Care Authority (HCA) and Managed Care Organizations (MCOs).
- 1.2. Great Rivers BH-ASO will maintain a critical incident management system consistent with all applicable laws and shall include policies and procedures for identification of critical incidents, reporting protocols, and oversight responsibilities.
- 1.3. Great Rivers BH-ASO designates the Clinical Director as the Critical Incident Manager responsible for administering the Critical Incident Management System and ensuring compliance with all contractual and legal requirements. The Critical Incident Manager will:
  - 1.3.1. Screen critical incident reports for appropriateness;
  - 1.3.2. Ensure an incident review/investigation is completed;
  - 1.3.3. Follow-up with each review/investigation until a disposition is reached for each;
  - 1.3.4. Report critical incidents, including investigations, follow-up activities, and dispositions regarding BH-ASO related incidents using HCA's Critical Incident Reporting System;
  - 1.3.5. Ensure aggregate incident data is reviewed as a quality management measure at the Great Rivers BH-ASO's Quality Management Committee meetings; and
  - 1.3.6. Ensure each contracted/subcontracted Behavioral Health Agency (BHA) establishes and maintains policies and procedures for critical incident reporting, which include timely reporting to Great Rivers BH-ASO.
- 1.4. Great Rivers BH-ASO shall ensure all BHAs and providers who serve individuals with Great Rivers BH-ASO funding understand they are required to report critical incidents and must make reports to Great Rivers BH-ASO.

1.5. BHAs and providers may also have other legally mandated reporting requirements related to an incident (e.g. child or adult protective service laws, as a condition of licensing, or Medicaid Fraud Control Unit). Reporting critical incidents to Great Rivers BHASO will not relieve providers of any other reporting obligations.

#### REPORTABLE CRITICAL INCIDENTS

- 2.1. Great Rivers BH-ASO and all BHAs will submit an Individual Critical Incident report for the following incidents that occur:
  - 2.1.1. To an individual receiving Great Rivers BH-ASO funded services and occurred within a contracted behavioral health facility (inpatient psychiatric, behavioral health agencies), Federally Qualified Health Center (FQHC), or by independent behavioral health provider. Acts allegedly completed, to include:
    - 2.1.1.1. Abuse, Neglect, or sexual/financial exploitation; and
    - 2.1.1.2. Death.
  - 2.1.2. By an individual receiving Great Rivers BH-ASO funded services, with a behavioral health diagnosis, or history of behavioral health treatment within the previous 365 days. Acts allegedly completed, to include:
    - 2.1.2.1. Homicide or attempted homicide;
    - 2.1.2.2. Arson;
    - 2.1.2.3. Assault or action resulting in serious bodily harm which has the potential to cause prolonged disability or death;
    - 2.1.2.4. Kidnapping;
    - 2.1.2.5. Sexual assault;
    - 2.1.2.6. Incidents posing a credible threat to an individual's safety;
    - 2.1.2.7. Suicide and attempted suicide; and
    - 2.1.2.8. Poisoning/overdoses unintentional or intention unknown.
  - 2.1.3. Unauthorized leave from a behavioral health facility during an involuntary detention, when funded by Great Rivers BH-ASO.
  - 2.1.4. Any event involving an individual that has attracted or is likely to attract media coverage, when funded by Great Rivers BH-ASO.
    - 2.1.4.1. Great Rivers BH-ASO and its contracted BHAs will provide the reference to the media source in the critical incident report.
  - 2.1.5. When a critical incident occurs, the incident descriptions above should be utilized to determine if a report is required. Incidents that fall outside of the descriptions may be reported and must be reported at the request of Great Rivers BH-ASO. Professional judgment is required for reports that fall outside of the scope of the incidents described above.

#### PROCEDURE:

- 3.1 Great Rivers BH-ASO Critical Incident Reporting
  - 3.1.1. Great Rivers BH-ASO will report critical incidents within one (1) business day (before 5pm, when possible) of becoming aware of the incident and shall

report critical incidents that have occurred within the last thirty (30) calendar days, with the exception of critical 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.

- 3.1.1.1. Great Rivers BH-ASO will enter the initial report, follow-up, and actions taken into the HCA Incident Reporting system <a href="http://fortress.wa.gov/hca/ics/">http://fortress.wa.gov/hca/ics/</a>, using the report template within the system.
- 3.1.1.2. If the system is unavailable, Great Rivers BH-ASO will make the report via email to <a href="https://example.com/HCABHASO@hca.wa.gov">HCABHASO@hca.wa.gov</a>.
  - 3.1.1.2.1. If HCA asks for additional information as required for further research and reporting, Great Rivers BH-ASO will provide the additional information within three (3) business days of HCA's request.
- 3.1.2. Great Rivers BH-ASO will follow all guidelines provided by MCOs who serve the Great Rivers BH-ASO region, regarding incident report notification.
- 3.2. Behavioral Health Agency (BHA) Critical Incident Reporting
  - 3.2.1. BHAs must complete all notification requirements and documentation for each incident report within the reporting timeframes.
  - 3.2.2. Notification should be given to the Great Rivers BH-ASO Critical Incident Manager. If the Critical Incident Manager cannot be reached, the Great Rivers BH-ASO main line (360-953-5117 or 800-215-4460) should be contacted for direction.
  - 3.2.3. BHAs will notify Great Rivers BH-ASO of all critical incidents within one (1) business day (before 5pm, when possible) of becoming aware of the incident.
  - 3.2.4. All Notifications must be followed by a written report to Great Rivers BH-ASO using Great Rivers BH-ASO Critical Incident Report Form according to the reporting timelines found in this policy and on the form.
    - 3.2.4.1. **Section A** of the Great Rivers BH-ASO Critical Incident Report Form shall be completed and submitted to Great Rivers BH-ASO within one (1) business day (before 5pm) of identification/awareness of an incident.
    - 3.2.4.2. BHAs shall provide a comprehensive review of all critical incidents to Great Rivers BH-ASO using the Incident Report Form. **Section B** of the Great Rivers BH-ASO Critical Incident Report Form shall be completed and submitted to Great Rivers BH-ASO within thirty (30) business days of identification/awareness of incident.
      - 3.2.4.2.1. If an autopsy is performed and the outcome changes the BHA's report, the BHA must complete a revised Section B of the incident report form that reflects the medical examiners information within ninety (90) days of the incident.

- 3.2.5. Critical incident report forms must be submitted to Great Rivers BH-ASO through a secure method and have date of submission indicated. The following methods are acceptable, in order of preference:
  - 3.2.5.1. SFTP site, followed by an email notification of the submission to the Critical Incident Manager;
  - 3.2.5.2. Secure/encrypted email sent to the Critical Incident Manager; or
  - 3.2.5.3. Secure fax (360-359-7758 or 855-936-1291) followed by an email notification of the submission to the Critical Incident Manager.
- 3.2.6. Note: If an "Out of Office" notification is received after sending an email to the Critical Incident Manager, please contact the individual(s) listed in the email to ensure Great Rivers BH-ASO receives the required incident report notification within the required timeframes.
- 3.2.7. BHAs must ensure each section of the form is complete and accurate. Great Rivers BH-ASO may require BHAs to provide additional information about the report to complete the incident review and bring the report to a close.
- 3.2.8. Great Rivers BH-ASO will not close a critical incident report unless all relevant follow-up information has been received, including, a complete Section B that includes a description of action steps the BHA has taken or will take to mitigate the circumstances and, if applicable, how to prevent similar incidents from occurring in the future.
- 3.3 Critical Incident Reports Regarding Multiple Individuals
  - 3.3.1. Critical incident reports are always person specific. If an incident involves or affects multiple individuals served and funded by Great Rivers BH-ASO, a separate report must be submitted for everyone affected by the incident. For example, if a staff person abused one individual in a group, one report is required. If that staff person abused three people in the same group, three reports are required, one for everyone. Each report would describe the incident and the effect the incident had on the specific individual as well as the current status of the individual named in the report. Steps to minimize harm to the individual will be specific to the individual named in the report, etc.
- 3.4. Reports of Critical Incidents Made Involving Individuals Served at Multiple Agencies
  - 3.4.1. If an incident occurs in relation to an individual who has or is receiving more than one type of service (such as mental health, crisis, and/or substance use disorder treatment), only one incident report notification is required per incident.
  - 3.4.2. The BHA that first becomes aware of the incident is responsible for completing the notification and Part A of the incident report unless, by mutual agreement, a more appropriate BHA takes responsibility for completing the notification or incident report document. This might be the case, for example, where the incident has a direct or obvious relationship to, and impacts on, the delivery of a particular type of service.

- 3.4.3. If the BHA that first becomes aware of the incident is not the lead BHA with primary responsibility for the individual's services, then the informed BHA must ensure that the lead BHA, where known, is notified. Together BHAs are to determine who will take responsibility for completing Part B of the incident report.
- 3.5. Reports of Critical Incidents Made by Persons Outside of Serving BHAs
  - 3.5.1. Individuals, family members of individuals, allied providers, or any other persons may initiate reports of critical incidents as needed.
  - 3.5.2. When information about an incident is received from any person other than a BHA, the provider receiving the information completes and submits the applicable Part A incident report form and submits it to the Great Rivers BH-ASO Critical Incident Manager.
  - 3.5.3. The Critical Incident Manager will notify the pertinent BHA of the submission, usually by giving them a copy of the report.
  - 3.5.4. The notified BHA has responsibility for initiating a review of the incident and completing Part B of the incident report to submit to the Great Rivers Critical Incident Manager within thirty (30) calendar days of notification of the incident.
- 3.6 Critical Incident Report Monitorina
  - 3.6.1. Semi-Annual Reporting to HCA
    - 3.6.1.1. Great Rivers BH-ASO will submit a semi-annual report of all critical incidents tracked for individuals receiving BH-ASO funded services during the previous six (6) months. The report will include an analysis of the following incidents:
      - 3.6.1.1.1. Incidents reported through the HCA Critical Incident reporting system;
      - 3.6.1.1.2. Incidents posing a credible threat to an individual's safety;
      - 3.6.1.1.3. Suicide and attempted suicide; and
      - 3.6.1.1.4. Poisoning/overdoses unintentional or intention unknown.
    - 3.6.1.2. Great Rivers BH-ASO will address the following in the analysis:
      - 3.6.1.2.1. How Great Rivers BH-ASO's critical incident reporting program has been structured and operationalized;
      - 3.6.1.2.2. The number and types of critical incidents and comparisons over time;
      - 3.6.1.2.3. Trends found in the population (i.e. regional differences, demographic groups, vulnerable populations);

- 3.6.1.2.4. Actions taken by Great Rivers BH-ASO to reduce critical incidents based on the analysis, and other actions taken and why;
- 3.6.1.2.5. Great Rivers BH-ASO will evaluate the effectiveness of the critical incident reporting program over the reporting period and make changes, as needed.
- 3.6.1.3 Great Rivers BH-ASO will submit the semi-annual report as a Word document along with the HCA-provided data file that contains all the critical incidents from which the analysis is made to HCA no later than the last business day of January and July for the previous six (6) month period.
  - 3.6.1.3.1. The January report will reflect critical incidents that occurred July through December; and
  - 3.6.1.3.2. The July report will reflect critical incidents that occurred January through June.
- 3.6.2. Great Rivers BH-ASO Critical Incident Report Monitoring
  - 3.6.2.1. BHA Quality Reviews
    - 3.6.2.1.1. Great Rivers BH-ASO may perform a quality review of selected critical incidents.
    - 3.6.2.1.2. Quality reviews will generally occur after the BHA's contract compliance audit has been completed but may occur immediately following the incident.
    - 3.6.2.1.3. Great Rivers BH-ASO may contact the BHA to help facilitate any administrative review(s) deemed necessary. BHAs shall cooperate fully with such requests and shall provide documents and information to facilitate any investigation.
    - 3.6.2.1.4. Quality reviews shall focus on the safety of clinical care and services provided to individuals within the Great Rivers BH-ASO's regional service area (RSA). Quality reviews will focus on the quality of the BHA's internal review and may extend to a review of a BHA's policy and/or practice.
    - 3.6.2.1.5. Quality reviews may result in recommendations or requirements for corrective action. The BHA shall ensure that all plans for corrective action are implemented, whether imposed by Great Rivers or the BHA's own Incident Review Committee.
  - 3.6.2.2. Committee Review

- 3.6.2.2.1. Great Rivers BH-ASO Critical Incident and Grievance Committee (CIGC)
  - 3.6.2.2.1.1. The CIGC, an internal committee, reviews aggregate data and individual reports to maintain standards of professional and ethical practice. The committee may make systemic recommendations to the Quality Management Committee or individual-level recommendations to the applicable BHA(s).
  - 3.6.2.2.1.2. The CIGC meets at least quarterly.
- 3.6.2.2.2. Great Rivers BH-ASO Quality Management Committee (QMC)
  - 3.6.2.2.1. The QMC reviews aggregate critical incident data, tracks trends, and provides oversight, analysis, and evaluation of quality improvement activities related to the critical incident reporting system throughout the RSA.
  - 3.6.2.2.2. The QMC may also recommend policy revisions to ensure program effectiveness.

### **POLICY SIGNATURE**

| DocuSigned by: Vickie L. Kaines  2EC90BCF63204FC | 7/9/2021 |  |
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| Vickie L. Raines, Chair                          | Date     |  |
| Great Rivers BH ASO Governing Board              |          |  |