

POLICIES AND PROCEDURE MANUAL

Chapter:	Quality		
Title:	Critical Incidents		
Policy: <input checked="" type="checkbox"/> Procedure: <input type="checkbox"/> Version: 1.0 Page: 1 of 3	Review Cycle: Annually Author: Quality Improvement Council, Chief Compliance Officer	Adopted Date: 7.1.2014 Review Date: 7.7.15 Revision Eff. Date:	Related Policies: Quality Management Policy

DO NOT WRITE IN SHADED AREA ABOVE

Purpose: To ensure that the Mid-State Health Network (MSHN) Pre-paid Inpatient Health Plan is in compliance with the Michigan Department of Community Health (MDCH), Medicaid Managed Specialty Supports and Services Contract, and Critical Incident Reporting System.

Policy: MSHN delegates responsibility to its Community Mental Health Services Program (CMHSP) Participants and Coordinating Agencies (CA), with oversight and monitoring by MSHN, for collecting, analyzing and reporting to MSHN all critical incidents that meet the criteria as specified in the MDHHS Medicaid Specialty Supports and Services Contract.

The CMHSP/CA report critical incidents as required to MSHN for analysis and aggregation. MSHN reports to the MDHHS, critical incident data as required in accordance with the Medicaid Managed Specialty Supports and Services Contract.

For the sake of Critical Incident reporting, a consumer is considered to be actively receiving service when any of the following occur:

1. A face-to-face intake has occurred and the individual was deemed eligible for ongoing service, or
2. The CMHSP/PIHP has authorized the individual for ongoing service, either through a face-to-face assessment or a telephone screening, or
3. The individual has received a non-crisis, non-screening encounter.

The period during which the consumer is considered to be actively receiving service shall take place between the begin date and end date, inclusively:

1. Begin Date: Actively receiving services begins when the decision is made to start providing ongoing non-emergent services. Specifically, the begin date shall be the first date that any of the 3 conditions referenced above occurs.
2. End Date: The date the formal discharge takes effect shall be the end date. This should also be the date that is supplied to the consumer when the consumer is notified that services are terminated.

The CMHSP/CA is responsible for ensuring a process is in place to recommend and implement corrective action plans and quality improvement processes in an effort to prevent the reoccurrence of critical incidents.

Oversight and monitoring shall be conducted by MSHN through the review of reports, analysis by the Quality Improvement Council, provider network monitoring desk audit and site reviews.

Critical incidents are defined as:

1. **Suicides** by any consumer who actively received services or who had received an emergent service within the last 30 calendar days. .
2. **Non-Suicide Deaths:** by consumer who was actively received services at the time of their death and who met any one of the 2 following conditions:
 - A. Lived in a specialized Residential or a child-caring institution or
 - B. Received any of the following:
 - Community Living supports,
 - Supports Coordination,
 - Targeted Case management
 - Assertive Community Treatment
 - Home-Based
 - Wrap-Around
 - Habilitation Supports Waiver (HSW)
 - Serious Emotional Disturbance (SED) Waiver
 - Child Waiver (CS) Waiver
3. **Emergency Medical Treatment due to Injury or Medication Errors:** occurs with a consumer who, at the time of the event was actively receiving services and met any one of the following two conditions:
 - A. Lived in a 24-hour Specialized Residential setting (per the Administrative Rule R330.1801-09) or in a Child-Caring Institution, or
 - B. Received Habilitation Supports Waiver Services, SED Waiver Services or Child Waiver Services.
4. **Hospitalization due to Injury or Medication Error:** occurs with a a consumer who at the time of the event was actively receiving services and met any one of the following two conditions:
 - A. Lived in a 24-hour Specialized Residential setting (per the Administrative Rule R330.1801-09) or in a Child-Caring Institution, or
 - B. Received Habilitation Supports Waiver Services, SED Waiver Services or Child Waiver Services.
5. **Arrest:** of a consumer who, at the time of their arrest was actively receiving services and met any one of the following two conditions:
 - A. Lived in a 24-hour Specialized Residential setting (per the Administrative Rule R330.1801-09) or in a Child-Caring Institution, or
 - B. Received Habilitation Supports Waiver Services, SED Waiver Services or Child Waiver Services.

Applies to

- ☒ All Mid-State Health Network Staff
☐ Selected MSHN Staff, as follows:
☒ MSHN's Affiliates: ☐ Policy Only ☒ Policy and Procedure
☐ Other: Sub-contract Providers

Definitions

ACT: Assertive Community Treatment

CA: Coordinating Agency

CMHSP: Community Mental Health Service Provider

CS Waiver: Child Waiver

HSW: Habilitation Supports Waiver

MDHHS: Michigan Department of Health & Human Services

MSHN: Mid-State Health Network

PIHP: Pre-paid Inpatient Health Plan

SED: Serious Emotional Disturbance

Other Related Materials

NA

References/Legal Authority

MDCH-Medicaid Managed Specialty Support and Services Contract

Attachment P.6.7.1.1.

Attachment 6.5.1.1

Change Log:

<u>Date Of Change</u>	<u>Description of Change</u>	<u>Responsible Party</u>
7.1.2014	New Policy	A. Brown