

Mid-State Health Network
SUDP-Delegated Managed Care Review
Oversight of Critical Incidents



Provider: Click or tap here to enter text.

Date: Click or tap here to enter text.

Review Participants: Click or tap here to enter text.

*Findings include Met/Partial/Unmet

Standard/Requirement	Reviewer guidelines	Evidence	*Findings
13.2 The Provider has a process to identify, review, analyze, and report adverse events within the required time frame to external entities as required. <u>MSHN-Sentinel Event Policy; MSHN SUD Incident Review Policy</u>			
The Provider reviews/reports the critical incidents/sentinel events as required to MSHN for analysis and aggregation. <u>SUD 24 hour residential/Recovery Housing</u> <ul style="list-style-type: none"> Death of Recipient (does not include natural cause death) Emergency medical treatment due to injury or med error Hospitalization due to injury or med error, Arrests or convictions Physical Illness requiring hospitalization Behavioral episodes/Serious challenging behaviors 	Should be in policy/procedure and evidenced by submissions through critical incident reporting system.		
Include mechanism for notifying MSHN of any Critical Incidents that may be High-Risk or High Profile (Event Notification and/or Sentinel Events)	Should be in a policy/procedure		
Additional Review/Root Cause Analysis (RCA) P/P	Reviewer guidelines	Evidence	*Findings
Unexpected deaths-include review and screens with standard information (death certificate, coroner's report) Involvement of medical personnel in the mortality reviews. Documentation of the mortality review process-findings, recommendations, used to address quality of care, trends over time.	Included in a policy/procedure. Evidenced by review of documents to support reported incident/event. Death certificate should be obtained or attempted in efforts to accurately report and determine potential improvement processes.		
Determination that incident is sentinel within 3 business days of the incident.	Included in a policy/procedure		
Commencement or initiation of a Root Cause Analysis (RCA) within 2 business days of the identification of the sentinel event. RCA must include action steps based on results (or documentation as to why none apply), and person responsible with timelines. Each organization should identify a reasonable standard timeframe when the RCA should be completed.	Included in a policy/procedure		
Person reviewing has appropriate credentials to review scope of care.	Included in a policy/procedure. Evidence by members of review committee, or signature		
Trends and data are reviewed and monitored at a local level.	Included in a policy/procedure		

Mid-State Health Network
SUDP-Delegated Managed Care Review
Oversight of Critical Incidents



Follow through to assure that follow through occurs on any area where recommendations have been made for improvement:	Evidence to support recommendations		
Critical Incident Review/Primary Source Verification	Reviewer guidelines	Evidence	Verified (Yes/No)
Consumer ID:	Consumer reported matches documentation		
Date of Incident:	Document date matches report date		
Date Submitted:	Within required timeframe per MDHHS/MSHN		
Incident Type:	Documentation support reported incident		
IR Fully Completed:	All section s completed with information or NA		
If Sentinel, was it identified within required time frames? Include dates	Documentation of date determined to be sentinel.		
If Sentinel was RCA completed and initiated within required time frames? Include dates	Documentation of date RCA was initiated		
Critical Incident Review/Primary Source Verification	Reviewer guidelines	Evidence	Verified (Yes/No)
Consumer ID:	Consumer reported matches documentation		
Date of Incident:	Document date matches report date		
Date Submitted:	Within required timeframe per MDHHS/MSHN		
Incident Type:	Documentation support reported incident		
IR Fully Completed:	All section s completed with information or NA		
<i>If Sentinel was it identified within required time frames? (within 3 days of occurrence) RCA completed? Include dates(commence within 2 days of the identification of the sentinel event)</i>	Documentation of date determined to be sentinel.		
If Sentinel was RCA initiated within required time frames? Include dates	Date RCA was initiated		
Critical Incident Review/Primary Source Verification	Reviewer guidelines	Evidence	Verified (Yes/No)
Consumer ID:	Consumer reported matches documentation		
Date of Incident:	Document date matches report date		
Date Submitted:	Within required timeframe per MDHHS/MSHN		
Incident Type:	Documentation support reported incident		
IR Fully Completed:	All section s completed with information or NA		
If Sentinel was it identified within required time frames? RCA completed? Include dates	Documentation of date determined to be sentinel.		
If Sentinel was RCA initiated within required time frames? Include dates	Date RCA was initiated		

Mid-State Health Network
SUDP-Delegated Managed Care Review
Oversight of Critical Incidents



Critical Incident Review/Primary Source Verification	Reviewer guidelines	Evidence	Verified (Yes/No)
Consumer ID:	Consumer reported matches documentation		
Date of Incident:	Document date matches report date		
Date Submitted:	With in required timeframe per MDHHS/MSHN		
Incident Type:	Documentation support reported incident		
IR Fully Completed:	All section s completed with information or NA		
If Sentinel was it identified within required time frames? RCA completed? Include dates	Documentation of date determined to be sentinel.		
If Sentinel was RCA initiated within required time frames? Include dates	Date RCA was initiated		
Summary			
# incidents reviewed/# incidents validated			
Strengths:			
Growth Areas:			
Recommendations:			
Findings:			