

Subject: Internal Event Reporting – Abuse, Neglect, and Exploitation Reporting Overarching Policy: SWMBH Policy 3.5 Incident Event and Death Reporting		ACCOUNTABILITY: QAPI	Effective Date: 10/03/2014	Pages: 3
REQUIRED BY BBA Section _____ PIHP Contract Section _____ NCQA/URAC Standard _____ SA SARF _____ Other _____		Last Reviewed Date: 7/14/16	Past Reviewed Dates: 10/13/14 5/25/16	
LINE OF BUSINESS <input checked="" type="checkbox"/> Specialty Waiver (B/C) <input checked="" type="checkbox"/> I Waiver <input checked="" type="checkbox"/> ABW Waiver <input checked="" type="checkbox"/> SUD Medicaid <input checked="" type="checkbox"/> SUD CA Block Grant <input checked="" type="checkbox"/> MME <input type="checkbox"/> Other: _____	APPLICATION <input checked="" type="checkbox"/> SWMBH Staff and Ops <input type="checkbox"/> Participant CMHSPs <input type="checkbox"/> SUD Providers <input type="checkbox"/> MH / DD providers <input type="checkbox"/> DD providers <input type="checkbox"/> MME providers <input type="checkbox"/> Other: _____	Last Revised Date: 7/14/16	Past Revised Dates: 10/13/14 5/25/16	
Approved: _____ By: _____ Date: _____		Required Reviewer: Director of QAPI and Director of UM & ME		

I. Purpose

For Southwest Michigan Behavioral Health (SWMBH) staff that may come in contact or gain knowledge of customer abuse, neglect, exploitation, or an event that is defined as reportable through their work.

II. Scope

All SWMBH staff who are aware of a possible reportable event will follow the procedures below to report the event and complete any required follow up steps.

III. Procedural Steps

Abuse, Neglect, and Exploitation Event:

- A. Immediately when a person learns of an event that qualifies as suspected abuse, neglect, or exploitation the staff should report to the appropriate legal bodies (per law and licensing standards).
- B. The Event Reporting Form should be completed and provided to the Quality Assurance and Performance Improvement (QAPI) Director for further organizational review and follow up.

Sentinel Event, Critical Incident and Risk Event:

- A. The Event Reporting Form should be completed and provided to the QAPI Director for further organizational review and follow up.

Integrated Care Organization Reportable Event:

- A. Events that are required to be reported to the Integrated Care Organization (ICO) will be provided within the agreed upon timeframes.

IV. Definitions

A. Critical Incident

1. An incident that meets the state reporting definitions listed:
 - a. Suicide, Non-Suicide Death, Emergency Medical treatment due to Injury or Medication Error, Hospitalization due to Injury or Medication Error, Arrest of Consumer, or Injury as a result of physical management.
2. Populations that qualify:
 - a. Individuals who living in a Specialized Residential facility (per Administrative Rule R330.1801-09) or
 - b. Individuals who are living in a Child-Caring institution; or
 - c. Individuals who are receiving Habilitation Supports Waiver services, SED Waiver services, or Children's Waiver services
 - d. For non-suicide related deaths: for individuals who were actively receiving services and were living in a Specialized Residential facility (per Administrative Rule R330.1801-09) or in a Child-Caring institution; or were receiving community living supports, supports coordination, targeted case management, ACT, Home-based, Wraparound, Habilitation Supports Waiver, SED waiver or Children's Waiver services.
 - e. Suicide for any individual actively receiving services at the time of death, and any who have received emergency services within 30 days prior to death. Once it has been determined whether or not a death was suicide, the suicide must be reported within 30 days after the end of the month in which the death was determined. If 90 calendar days have elapsed without a determination of cause of death, the PIHP must submit a "best judgment" determination of whether the death was a suicide. In this event the time frame described in "a" above shall be followed, with the submission due within 30 days after the end of the month in which this "best judgment" determination occurred.

B. Sentinel Event

1. An "unexpected occurrence" involving death (not due to the natural course of a health condition) or serious physical or psychological injury or risk thereof. Serious injury specifically includes permanent loss of limb or function. The phrase "or risk thereof" includes any process variation for which recurrence would carry a significant chance of a serious adverse outcome. (JCAHO, 1998) Any injury or death that occurs from the use of any behavior intervention is considered a sentinel event.

C. Risk Events Management

1. A process for analyzing risk events that put individuals at risk of harm. This analysis should be used to determine what action needs to be taken to remediate the problem or situation and to prevent the occurrence of additional events and incidents.

D. Unexpected Occurrence

1. A behavior or event not covered within the consumer's treatment plan, a planned procedure (surgery, etc.) or a natural result to the consumer's chronic or underlying condition or old age.

E. Immediate Notification

1. An "unexpected occurrence" involving a person receiving services involving unexpected death, homicide, or action by the person receiving services that requires immediate notification of the state to allow the state to address any required immediate follow-up actions including statements to the media, or removal of others from a group setting.

V. References

- A. SWMBH Policy 3.5 Incident Event and Death Reporting
 - 1. Michigan Department of Health and Human Services (MDHHS) Medicaid Specialty Supports and Services Contract.
 - a. Part II, Section 6.1.1 on Event Notification.
 - b. Quality Assessment and Performance Improvement Programs for Specialty Pre-Paid Inpatient Health Plans (Attachment P.6.7.1.1).
 - c. Michigan Performance Indicator Codebook- Section on Critical Incident Reporting Technical Requirement for Behavioral Treatment Plan Committee; Revision FY '12 (Attachment P.1.4.1).
- B. M.C.L. 330.723(2)(3) and 330.755f(l)(ii)
- C. M.C.L. 330.723(2)(3) and 330.755f(l)(ii)
- D. Child Abuse and Neglect Prevention Act, PA 250 of 1982
- E. Child Protection Law, PA 238 of 1975
- F. M.C.L. 712A- 712 A.32
- G. Social Welfare Act, PA 280 of 1939
- H. Michigan Penal Code, PA 328 of 1931
- I. Adult Protective Services, PA 519, 1982
- J. R.330.1801-330.1809
- K. R.400.51-400.15411

VI. Attachments

- A. SWMBH P3.5A Event Reporting Form

