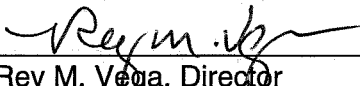


GUAM BEHAVIORAL HEALTH AND WELLNESS CENTER		
TITLE: Critical Incident Reporting	POLICY NO: AD-RM-02	Page 1 of 4
RESPONSIBILITY: Health and Safety/Risk Management		
APPROVED BY:  Rey M. Vega, Director	EFFECTIVE: DEC 27 2017	
	LAST REVIEWED/REVISED: 12/27/2017	

PURPOSE:

To provide a process for identifying consumer safety events (critical incidents), facilitate the timely and accurate reporting in order to promptly address the issue and determine the root cause so that corrective action may be taken to prevent future incidents.

POLICY:

- A. Guam Behavioral Health and Wellness Center seeks to improve consumer care by reviewing and responding to all consumer safety events or critical incidents, and abides by the 19GCA Chapter 13" Child Protective Act and Guam Public Law 19-54 Adult Protective Services Act. in reporting to Adult or Child Protected Services all incidents of consumer abuse.
- B. All critical incident reports must be complete, accurate, factual, and completed within twenty-four (24) hours of the incident and an internal investigation shall be conducted immediately for sentinel event and within forty-eight (48) – seventy hours (72) business hours for the other critical incidents that doesn't not meet the sentinel event criteria.
- C. All sentinel events shall initiate an investigation, debriefing and analysis of the root cause of the incident that will identify any quality improvements either through redesign or development of new systems or processes that would reduce the risk of such events occurring in the future. (See AD-RM-03 Sentinel Events Policy)
- D. All incident reports and internal incident investigation reports are confidential legal documents and are protected from disclosure except for purposes of meeting the requirements set forth in Guam Public Laws. It must be stored in a secured area and shall never be filed in the consumer's medical record.
- E. All personnel shall be provided with critical incidents training to be familiar with all circumstances that are considered critical incidents and sentinel events upon hire and annually.

DEFINITIONS:

- A. Critical Incidents: are consumer safety event or any actual event or situation that creates a significant risk that could have resulted or did result in harm to the physical or mental health, safety or well-being of a consumer in the course of service delivery, treatment, or care. Below are types of reportable Consumer Incidents
 1. Reportable Incident Type:
 - a. Abuse
 - b. Aggression or violence
 - c. Biohazardous accidents

- d. Communicable disease
- e. Elopement
- f. Infection control
- g. Incident involving injury
- h. Medication errors
- i. Neglect
- j. Suicide and attempted suicide
- k. Sexual assault
- l. Use of seclusion
- m. Use of restraint
- n. Use of unauthorized possession of legal or illegal substances
- o. Use of unauthorized possession of weapons
- p. Vehicular accidents
- q. Wandering

2. Critical Incidents are categorized as;

- a. Adverse event – a consumer safety event that resulted in harm to a consumer
- b. No-harm event – a consumer safety event that reaches the consumer but does not cause harm.
- c. Close call (or “good catch”) - is a consumer safety event that did not reach the consumer.
- d. Hazardous (or “unsafe”) condition(s) - is a circumstances (other than an individual’s own disease process or condition) that increases the probability of an adverse event.
- e. Sentinel Events - an incident that resulted in death, permanent harm or severe temporary harm. It is called “sentinel” because they signal a need for immediate investigation and response (*see policy AD-RM 03 Sentinel Events Policy*)

RESPONSIBILITY:

Health and Safety/Risk Management Officer:

- A. Shall investigate and conduct a risk analysis of all sentinel events (see Sentinel event policy) and other critical incidents will be investigated as deemed necessary.
- B. Shall convene a committee to debrief the staff involved in the incident as necessary.
- C. Shall report to the Quality Improvement Committee all incidents log monthly.
- D. Shall provide the management with a written annual analysis of all critical incidents and sentinel events that addresses;
 - 1. Causes and trends.
 - 2. Actions for improvement.
 - 3. Result of performance improvement plan
 - 4. Necessary education and training of personnel
 - 5. Prevention of recurrence
 - 6. Internal reporting requirement

Supervisor of the Staff Involved in the Incident

- A. The supervisor shall review the written report for completeness, accuracy and signatory requirements, note apparent causes of the incident, immediate measures taken and results of immediate measures within three (3) working days of the incident.
- B. Shall Inform the Risk Management Officer regarding the incident that may pose a risk to the Department.
- C. Shall document any findings of the action taken in the incident report

Quality Performance Improvement Committee:

- A. Shall review the Health and Safety/Risk Management Officer's report and shall make recommendations or develop actions for improvement to prevent similar events from occurring in the future.

PROCEDURES:

Reporting and Documentation of Incidents:

- A. The staff involved in an incident or most knowledgeable of the incident shall inform his/her supervisor and the risk management officer of the said incident with in the following time frames;
 1. Immediately if the incident is a sentinel event.
 2. Within twenty-four (24) hours or at the end of the shift for all other types of incident.
- B. The staff reporting an incident shall complete the incident form in the Electronic Behavioral Health Record (EBHR) within twenty-four (24) hours of the incident.
- C. A progress note must be made in the consumer's electronic medical record regarding the incident.

Internal Incident Investigation:

- A. All sentinel events require an internal investigation, and all other incidents will be investigated as deemed necessary by the risk management officer or the director.
- B. The internal investigation must be completed within ten (10) working days after the request for an internal investigation or debriefing was made.
- C. Recommendation and or internal incident investigation findings shall be documented in the Incident Follow –up Review Report in EBHR.

Debriefing/Review Committee Assessment

- A. If necessary, debriefing of the staff involved in the critical incident or sentinel event shall be conducted within forty- eight (48) – seventy – two (72) business hour of the event, and immediately if it's a sentinel event.
- B. The committee shall be formed by the Risk Management Officer and shall consist at a minimum the Supervisor and or Program Manager of the involved staff.
- C. The findings of the debriefing or investigation shall be reported to the Director, and documented in the incident report under the Incident Follow-up Review Report Field in the EBHR.

Reporting to External Agencies:

- A. Staff is required to follow Guam Public Law (*10GCA Chap. 2 and 19 GCA Chap.13*) to report the suspected or alleged abuse, neglect, and or exploitation to Adult Protective Services (APS) or Child Protective Services (CPS).

1. All incidents involving abuse, neglect, exploitation or abandonment require an immediate oral report to APS or CPS followed by a written report on the approved APS or CPS from within forty-eight (48) hours
2. If the incident of abuse, neglect, or exploitation is suspected to be a crime, the staff's immediate supervisor shall consult with the risk management officer and the director and immediately contact the Guam Police Department.

RELATED POLICY (IES):

- A. *AD-RM-01 Risk Management Program Plan*
- B. *AD-RM-03 Sentinel Event Policy*

SUPERSEDES:

- A. *Incident Reporting Protocol. 5/16/2012; Wilfred Aflague DMSHA Director.*
- B. *Suspected Abuse and or Neglect of a consumer by staff protocol;8/15/2012*

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**GUAM BEHAVIORAL HEALTH AND WELLNESS CENTER
REVIEW AND ENDORSEMENT CERTIFICATION**

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BEHAVIORAL HEALTH & WELLNESS

The signatories on this document acknowledge that they have reviewed and approved the following:

Policies and Procedure

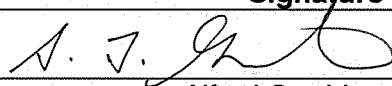
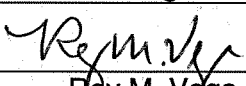
Submitted by: Quality Management

Protocol/Form

Policy No: AD-RM-02

Bylaws

Title: Critical Incident Reporting

<input checked="" type="checkbox"/> Reviewed <input type="checkbox"/> Endorsed	Date	Signature
	12/17/17	
Title	Name Title Alfred Garrido Health & Safety Officer	
<input checked="" type="checkbox"/> Reviewed <input type="checkbox"/> Endorsed	Date	Signature
	DEC 27 2017	
Title	Name Title Rey M. Vega Director	