



BUS Update Memorandum

TO: All BUS Users
FROM: Terry Burnham - BUS Analyst
DATE: November 20, 2017
RE: Critical Incident Reporting (CIR) Changes

What is changing?

On Monday, November 27, 2017, Community Centered Boards (CCBs) will start entering Critical Incident Reports (CIRs) into the BUS. For all other Case Management Agencies (CMAs), new questions have been added and there are modifications to some existing questions.

Why is this change being made?

Currently CCBs report CIRs in the Community Contracts Management System (CCMS)/DDDWeb, and SEPs report CIRs in the BUS. The Department of Health Care Policy and Financing (Department), Office of Community Living, recently underwent an Office restructure. As part of the restructuring, the Department is aligning processes, to include the reporting and follow-up of CIRs. This alignment provides the opportunity for the Department to streamline and consolidate the reporting of CIRs into one system. These changes will allow CMAs to report more accurate CIRs, improve preventive measures, create improved reporting capabilities for the Department, and will ensure compliance with federal guidelines.

Change #1

CIR Add Screen - Changes to existing questions

The CIR Add screen has been modified to incorporate mandatory questions the CMAs need to complete CIRs. These changes will also ensure more comprehensive critical incident reports.

1. Mistreatment has been added to the Incident Type of Abuse/Neglect/Exploitation. When this incident type is chosen, the description will reflect this change.

2. PASA has been added to the question “Name of Provider Agency who Reported incident to Case Manager.”
3. Two new selections for Incident Type in the Injury/Illness to Client section.
 - a. Pneumonia
 - b. Urinary Tract Infection (UTI)
4. Two new selections for Intervention Type under the question “Did this incident involve Restrictive Interventions?”
 - a. Emergency Control Procedure
 - b. Safety Control Procedure
5. One new selection for Source of Abuse/Neglect/Exploitation under the incident type of Abuse/Neglect/Exploitation.
 - a. Peer
6. Three new selections for Incident Type will now be available.
 - a. Missing Person
 - b. Criminal Activity
 - c. Unsafe Housing/Displacement
7. Five new selections for Location of Incident will now be available.
 - a. Group Home
 - b. Host Home
 - c. Other Home
 - d. Place of Employment
 - e. Transportation

These changes are all indicated in the screenshots below.

Screenshot of new Add CIR screen:

| Critical Incident Reporting | |
|--|---|
| CIRS ID: | Allocated after Save |
| *Date of Incident: | <input type="text"/> (mm/dd/yyyy) |
| *Time of Incident: | <input type="text"/> (HH:MM) Military time. |
| *Case Manager Incident Notification Date: | <input type="text"/> (mm/dd/yyyy) |
| Entry Date: | 10/17/2017 |
| Entry Time: | 10:03 |
| Client Name: | Figgy F Pudding |
| Client Medicaid ID: | Z998872 |
| Client Medicaid DOB: | 06/30/1930 |
| *HCBS Waiver Program: | HCBS-Supported Living Services |
| Case Manager Name: | |
| Case Manager Agency Name: | |
| Entered By: | Rhonda Johnson |
| *Name of Person Reporting Incident to CMA: | <input type="text"/> |
| *Did the Client Report this Incident? | <input type="radio"/> Yes <input type="radio"/> No |
| → *Name of Provider Agency or PASA who Reported incident to Case Manager: | <input type="text"/> |
| *Is the Provider Agency reporting the incident an Assisted Care Facility (ACF)? | <input type="radio"/> Yes <input type="radio"/> No |
| *Was Anyone other than the client involved in the incident? | <input type="radio"/> Yes <input type="radio"/> No |
| *Has this critical incident been substantiated? | <input type="radio"/> Yes <input type="radio"/> No |
| *Was APS/CPS involved in this CIR? | <input type="radio"/> Yes <input type="radio"/> No |
| *Was Law Enforcement involved in this CIR? | <input type="radio"/> Yes <input type="radio"/> No |
| → *Location of Incident: | <input type="text"/> **Expect refresh |
| → *Did this incident involve Restrictive Interventions? | <input type="radio"/> Yes <input type="radio"/> No **Expect refresh |
| *Did the incident result in an admission and/or treatment in the Emergency Room? | <input type="radio"/> Yes <input type="radio"/> No |
| *Did the Incident Result in Hospitalization? | <input type="radio"/> Yes <input type="radio"/> No **Expect refresh |
| *Did this incident result in a Skilled Nursing Facility Rehab Stay? | <input type="radio"/> Yes <input type="radio"/> No |
| *Did this incident result in Nursing Facility placement? | <input type="radio"/> Yes <input type="radio"/> No |
| *Did this incident result in a change and/or additional waiver services? | <input type="radio"/> Yes <input type="radio"/> No **Expect refresh |
| *Did this incident result in Reverse Deinstitutionalization (RDI)? | <input type="radio"/> Yes <input type="radio"/> No |
| *Did the incident require an occurrence report to CDPHE? | <input type="radio"/> Yes <input type="radio"/> No |
| *What could be done to prevent this type of incident in the future? | <input type="text"/> |
| → *Incident Type: | <input type="text"/> refresh **Expect refresh |

Screenshot of added Mistreatment Incident Type:

MISTREATMENT/ABUSE/NEGLECT/EXPLOITATION

Incidents or allegations of Mistreatment, Abuse, Neglect and/or Exploitation must be reported to HCPF by the next business day following discovery of the incident or allegations. Abuse includes actions which result in bodily harm, pain or mental distress. Neglect is a failure to provide care and/or service when an adult is unable to care for him or herself. Exploitation is the deliberate misplacement, exploitation, or wrongful temporary or permanent use of a client's belongings or money without the client's consent.

Reporting incidents to HCPF does not relieve the facility from reporting requirements of other regulatory or law enforcement agencies.

***Description of Incident:**

***Type of Mistreatment/Abuse/Neglect/Exploitation:** **Expect refresh

***Source of Mistreatment/ Abuse/ Neglect/ Exploitation:** **Expect refresh

Screenshot of new Incident Types:

***Incident Type:** →

*** Required.**
** IF NO REFRESH - Enable Javascript in browser.

- Criminal Activity
- Damage to Consumer's Property/Theft
- Death
- Injury/Illness to Client
- Medication Management Issues
- Missing Person
- Mistreatment/ Abuse/ Neglect/ Exploitation
- Unsafe Housing/Displacement
- Other High Risk Issues

**Expect refresh

Screenshot of new types of Restrictive Interventions:

***Did this incident involve Restrictive Interventions?** Yes No **Expect refresh

***Type of Intervention:** →

- Chemical
- Physical
- Mechanical
- Seclusion
- Other

***Explanation of Intervention:**

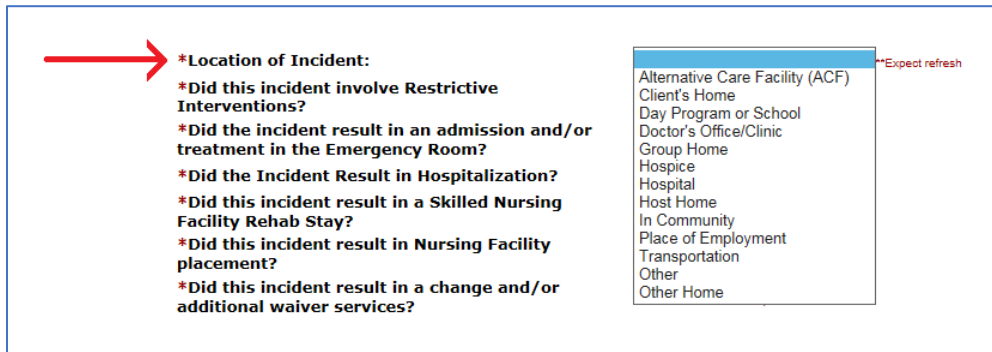
Screenshot of the addition of Peer to the source of Mistreatment:

***Type of Mistreatment/Abuse/Neglect/Exploitation:** **Expect refresh

***Source of Mistreatment/ Abuse/ Neglect/ Exploitation:** **Expect refresh

- Co-Habitant
- Family Member
- Peer
- Provider Staff
- Self
- Other

Screenshot of new Location of Incident selections:



A screenshot of a form interface. On the left, a red arrow points to a section titled '*Location of Incident:'. Below this title are five questions, each starting with an asterisk. To the right of these questions is a dropdown menu with a blue header bar. The dropdown menu is open, showing a list of location options. A red double asterisk is positioned to the right of the dropdown menu, with the text 'Expect refresh' next to it.

***Location of Incident:**

- *Did this incident involve Restrictive Interventions?**
- *Did the incident result in an admission and/or treatment in the Emergency Room?**
- *Did the Incident Result in Hospitalization?**
- *Did this incident result in a Skilled Nursing Facility Rehab Stay?**
- *Did this incident result in Nursing Facility placement?**
- *Did this incident result in a change and/or additional waiver services?**

Alternative Care Facility (ACF) **Expect refresh
Client's Home
Day Program or School
Doctor's Office/Clinic
Group Home
Hospice
Hospital
Host Home
In Community
Place of Employment
Transportation
Other
Other Home

Change #2

Add New CIR Screen - New Questions

The CIR Add screen has new questions to incorporate mandatory information the CMAs need to complete CIRs. These changes will also ensure more complete CIRs.

1. Was Law Enforcement involved in this CIR?
 - a. This is a Yes/No mandatory radio button to select.
2. Did the incident result in an admission and/or treatment in the Emergency Room?
 - a. This is a Yes/No mandatory radio button to select.
3. Was the client placed on an M-1 Hold?
 - a. This is a Yes/No mandatory radio button to select.
 - b. This question will **only** be visible if the Case Manager answered the Hospitalization question the following way:
 - i. Did the Incident Result in Hospitalization? - Yes
 - ii. Type of Hospital - Psychiatric Hospital
4. Did this incident result in a change and/or additional waiver services?
 - a. This is a Yes/No mandatory radio button to select.
 - b. If Yes is selected, then a mandatory comment box will display for further explanation of the changes in waiver services.
5. Did the incident require an occurrence report to CDPHE?
 - a. This is a Yes/No mandatory radio button to select.
6. What could be done to prevent this type of incident in the future?
 - a. System will display a mandatory comment box for the Case Manager to add a response.

Change #3

New Incident Types

There are three new Incident Types available to select. Each new Incident Type when chosen will include an incident description for review. These new selections will assist in determining the appropriate specifics of the critical incident.

Criminal Activity Incident Type

A definition will display for Case Managers to review. The following questions/menus will also be visible to provide the details of the criminal activity.

- Has the client been arrested/incarcerated?
 - This is a Yes/No mandatory radio button to select.
 - There will also be a large text box for explanation of details of the criminal activity.
- Seven selections will appear to select the Type of Criminal Activity.
 - Assault/Battery
 - Domestic Violence
 - Drug possession

- DUI/DWI
- Probation/parole violation
- Theft/Larceny
- Other (includes text box for explanation)

Missing Person Incident Type:

A definition will display for Case Managers to review. The following questions/menus will also be visible to provide the details of the missing person.

- Has a missing person report been made to law enforcement?
 - This is a Yes/No mandatory radio button to select.
 - There will also be a large text box for explanation of details of the missing person.

Unsafe Housing/Displacement Incident Type:

A definition will display for Case Managers to review. The following questions/menus will also be visible to provide the details of the unsafe housing/displacement.

- Is the client currently homeless?
 - This is a Yes/No mandatory radio button to select.
 - There will also be a large text box for explanation of details of the unsafe housing.
- What is being done to place the client in safe housing?
 - This will only appear if answering Yes to the question Is the client currently homeless?
 - A text box will display for explanation.
- Five selections will appear to select the Type of unsafe housing/displacement.
 - Eviction
 - Environmental hazard
 - Social environment
 - Structural hazard
 - Other (includes text box for explanation)
- If Eviction is selected for the Type of unsafe housing/displacement, another dropdown menu will appear for further classification, which includes the following.
 - Expiration of Lease
 - Home/Facility no longer meets the level of care needs
 - Property Damage
 - Unpaid rent
 - Violation of Home/Facility Rules
 - Other (includes text box for explanation)
- If Environmental hazard is selected for the Type of unsafe housing/displacement, another dropdown menu will appear for further classification, which includes the following.
 - Fire

- Flooding
 - Tornado
 - Other (includes text box for explanation)
- If Social environment is selected for the Type of unsafe housing/displacement, another dropdown menu will appear for further classification, which includes the following.
 - Facility staff
 - Family
 - Provider
 - Roommate/Co-habitant
 - Other (includes text box for explanation)
- If Structural hazard is selected for the Type of unsafe housing/displacement, another dropdown menu will appear for further classification, which includes the following.
 - Cold
 - Electrical
 - Gas
 - Heat
 - Infestation
 - Mold
 - Sanitation
 - Water
 - Other (includes text box for explanation)

Screenshot showing new questions on Add CIR screen:

Critical Incident Reporting

| | |
|--|--|
| CIRS ID: | Allocated after Save |
| *Date of Incident: | <input type="text"/> (mm/dd/yyyy) |
| *Time of Incident: | <input type="text"/> (HH:MM) Military time. |
| *Case Manager Incident Notification Date: | <input type="text"/> (mm/dd/yyyy) |
| Entry Date: | 10/17/2017 |
| Entry Time: | 10:38 |
| Client Name: | Banana pudding |
| Client Medicaid ID: | A012345 |
| Client Medicaid DOB: | 01/21/1993 |
| *HCBS Waiver Program: | <input type="text"/> Expect refresh |
| Case Manager Name: | Rhonda Heinen |
| Case Manager Agency Name: | DENVER OPTIONS, INC/Rocky Mtn Human Services |
| Entered By: | Rhonda Johnson |
| *Name of Person Reporting Incident to CMA: | <input type="text"/> |
| *Did the Client Report this Incident? | <input type="radio"/> Yes <input type="radio"/> No |
| *Name of Provider Agency or PASA who Reported incident to Case Manager: | <input type="text"/> |
| *Is the Provider Agency reporting the incident an Assisted Care Facility (ACF)? | <input type="radio"/> Yes <input type="radio"/> No |
| *Was Anyone other than the client involved in the incident? | <input type="radio"/> Yes <input type="radio"/> No |
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| *Was APS/CPS involved in this CIR? | <input type="radio"/> Yes <input type="radio"/> No |
| → *Was Law Enforcement involved in this CIR? | <input type="radio"/> Yes <input type="radio"/> No |
| *Location of Incident: | <input type="text"/> Expect refresh |
| *Did this incident involve Restrictive Interventions? | <input type="radio"/> Yes <input type="radio"/> No Expect refresh |
| → *Did the incident result in an admission and/or treatment in the Emergency Room? | <input type="radio"/> Yes <input type="radio"/> No |
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| → *Did this incident result in a change and/or additional waiver services? | <input type="radio"/> Yes <input type="radio"/> No Expect refresh |
| *Did this incident result in Reverse Deinstitutionalization (RDI)? | <input type="radio"/> Yes <input type="radio"/> No |
| *Did the incident require an occurrence report to CDPHE? | <input type="radio"/> Yes <input type="radio"/> No |
| → *What could be done to prevent this type of incident in the future? | <input type="text"/> |
| → *Incident Type: | <input type="text"/> Expect refresh |

* Required.
 ** IF NO REFRESH - Enable Javascript in browser.

If you have any questions about this change to the CIRs reporting, please contact:

Single Entry Points (SEPs) and Private Case Management Agencies (CMAs) -
 Michael Pasillas, CIRs Administrator Michael.Pasillas@state.co.us

Community Centered Boards (CCBs) -
 Andrea Behnke, CIRs Administrator Andrea.Behnke@state.co.us

BUS Administrator -
 Rhonda Johnson, BUS Analyst Rhondab.Johnson@state.co.us
 or
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