

FOOTHILLS GATEWAY, INC.

Critical Incidents to be Reported to Health Care Policy and Financing (HCPF):

Critical Incidents for all individuals in HCBS Waivers and State General Fund Programs are to be reported by Medicaid Providers, Provider Agencies, Independent Contractors (ICs), to Foothills Gateway. Foothills Gateway is responsible for reporting all critical incidents to HCPF. Critical incidents are those incidents that are serious in nature and pose immediate risk to the health, safety, or welfare of a waiver participant. Non-critical incidents are minor in nature and do not create a serious consequence or risk to the health, safety, or welfare to the waiver participant. Reportable incidents include:

1. **Injury/Illness to Persons Receiving Services**
 - An injury or illness that requires treatment beyond first aid which includes lacerations requiring stitches or staples, fractures, dislocations, loss of limb, serious burns, skin wounds, etc.
 - An emergency medical treatment that results in admission to the hospital.
 - A psychiatric crisis resulting in unplanned hospitalization
2. **Missing Person**
 - Person is not immediately found; their safety is at serious risk or there is a risk to public safety.
3. **Medication Management Issue**
 - Deliberate damage, destruction, theft or use of a recipient's belonging or money.
 - Issues with medication dosage, scheduling, timing, set-up, compliance and administration or monitoring which results in harm or an adverse effect which necessitates medical care
4. **Damage to Individual's Property/Theft**
 - If incident is mistreatment by a care giver that results in damage to the individual's property or theft the incident shall be listed as mistreatment.
5. **Criminal Activity**
 - A criminal offense that is committed by a person.
 - A violation of parole or probation that potentially will result in the revocation of parole/probation.
 - Any criminal offense that is committed by a person receiving services that results in immediate incarceration.
6. **Unsafe Housing/Displacement**
 - Individual is residing in unsafe living conditions due to a natural event (such as fire or flood) or environmental hazard (such as infestation) and is at risk of eviction or homelessness.
7. **Death**
 - Expected or unexpected
8. **Abuse/Neglect/Exploitation**
Abuse Means
 - The non-accidental infliction of physical pain or injury, as demonstrated by, but not limited to, substantial or multiple skin bruising, bleeding, malnutrition, dehydration, burns, bone fractures, poisoning, subdural hematoma, soft tissue swelling, or suffocation.

- Confinement or restraint that is unreasonable under generally accepted caretaking standards; or
- Subjection to sexual conduct or contact classified as a crime under the “Colorado Criminal Code”, Title 18, C.R.S.
 - Having a Sexually Transmitted Disease (STD) on its own is not a critical incident. If abuse is suspected as the reason for contracting the STD, then a critical incident report should be submitted for the suspected abuse

Neglect Means

- Neglect that occurs when adequate food, clothing, shelter, psychological care, physical care, medical care, habilitation, supervision, or other treatment necessary for the health and safety of a person is not secured for or is not provided by a caretaker in a timely manner and with the degree of care that a reasonable person in the same situation would exercise, or a caretaker knowingly uses harassment, undue influence, or intimidation to create a hostile or fearful environment for waiver participant.

Exploitation Means

- An act or omission committed by a person who:
 - Uses deception, harassment, intimidation, or undue influence to permanently or temporarily deprive a person of the use, benefit, or possession of anything of value.
 - Employs the services of a third party for the profit or advantage of the person or another person to the detriment of the person receiving services.
 - Forces, compels, coerces, or entices a person to perform services for the profit or advantage of the person or another person against the will of the person receiving services; or
 - Misuses the property of a person receiving services in a manner that adversely affects the person to receive health care or health care benefits or to pay bills for basic needs or obligations.

PROCEDURE:

Reporting procedure Medicaid Providers / IDD Provider Agencies and Foothills Gateway responsibilities:

- Any critical incident, as described above, is to be reported directly to FGI including:
 - Incidents that occur outside the delivery of waiver services and critical incidents that occurred in the past and have been newly reported.
 - Peer-to-peer critical incidents
- All participants must be advised of their rights and responsibilities in reporting critical incidents by their Case Manager at their Service Plans.
- The Case Manager will be notified of **any** critical incident during Foothills Gateway, Inc. regular working hours. A call should also be made by provider agency staff to the Case Manager’s phone, and a voicemail message left when critical incidents occur after hours.
- Scheduled medical procedures and surgeries should not be reported as critical incidents.

- Trips to the emergency room or urgent care that does not meet the criteria for emergent treatment should also not be reported as a critical incident.
 - Visits to an emergency room or urgent care that result in emergency medical treatment or for a serious medical condition would be reported as a critical incident.

Examples:

Emergency medical treatments for a stroke, broken bone, lacerations that require stitches, and heart attacks.

The incident report should include all available information required by HCPF rules. The report is to include information on the initial/preliminary action taken by the agency in response to the allegation, injury, medical crises, or other occurrence and **indicate what additional follow-up is planned. It will include location of incident, staff involved and treatment location/hospital.**

- Must be submitted to Foothills Gateway **as soon as possible but no later than 24 hours from incident or report of incident.**
 - Case Management Agency staff will report through the FGI incident report application
 - Provider agencies (IDD) will submit Critical Incidents through the FGI incident portal.
 - Medicaid providers (non-IDD) can submit Critical incidents the following ways:

Fax: 970-829-4419

Email: incidentreports@foothillsgateway.org indicate high priority.

FGI incident report web-based portal – contact FGI IT staff for access.

Foothills Gateway Critical Incident Entry into CCM for HCPF Review

The critical incident will be entered by FGI Administrative staff into the Care and Case Management System (CCM) on or before the next business day from when it was reported and submitted to HCPF.

- The FGI Admin staff will email the Case Management Directors, Placement Coordinator, and Quality Assurance Specialist, Lead Case Manager or CM Coordinator, & Case Manager of any critical incidents entered in the CCM and submitted to HCPF.
- Case Managers will be responsible to complete any follow-up needed in the CCM.
 - The request from HCPF for CIR follow-up will show on the Primary Case Managers task list in the CCM.
 - The case manager will review the CCM tasks lists daily for HCPF follow-up requests and provide it by the requested due date from HCPF. If the information necessary to complete the follow-up hasn't been received by the HCPF due date, the CM should submit follow-up to HCPF indicating what has been done and "more follow-up is requested".
 - If the CM isn't available to provide follow-up, the CM Lead/Supervisor will provide it.
 - Leads/Supervisors will reference the CIR follow-up tracking spreadsheet created by the FGI Quality Assurance Specialist (QAS) to determine if follow-up is needed. The QAS generates a CIR follow-up report the first working day of every week to determine which incidents

require follow-up. QAS tracks the HCPF requested due date on the report spreadsheet and if it has been completed.

- Since the QAS report is only completed on the first day of the work week, the CM Lead/Supervisor will review the CIR emails provided by file room staff every subsequent day throughout the work week and check the CCM for follow-up needed. They will continue to do this until the CM returns to work.
- FGI Administrative staff also tracks follow-up requests at the end of every day and indicates that CM is still waiting for follow-up if none has been provided by the due date. An email to the CM and Supervisor will be sent to indicate HCPF was notified that follow-up is still needed.

Case Management Training

All Case Managers, CM Supervisors, Directors, and administrative staff that are responsible for CIR reporting and follow-up will review the HCPF CIR training webinar and the FGI process for submitting and following up on critical incidents with CM Department Trainer upon hire and as needed.

Please note:

That requirements for occurrence reporting by provider agencies licensed with the Colorado Department of Public Health and Environment (CDPHE) (i.e., GRSS, HCA, EBD, BI agencies) continue to be the responsibility of the provider agency.

2/03...10/22; 12/22; 3/24