

Senior and Disabilities Services
Critical Incident Report
(CIR)
and
Critical Incident Improvement Plan
(CIIP) Processes

(effective March 1, 2011)



Critical Incident Reports



Providers are the bedrock of supports in our communities

- SDS is responsible for monitoring health and safety of recipients
- Through the supports given by providers

Critical Incident Reports



Good communication can help us find our way through the "forest"

- Required part of HCB waivers (from Medicaid- CMS)
- A communication tool between providers and SDS

Critical Incident Improvement Plan



*Providers give support to
vulnerable Alaskans*

- CIIPs will increase
 - Support to providers
 - Are already experiencing and responding to Critical Incidents
- Majority of responses appropriate per health and safety

CIR and CIIP Together



*Gathering knowledge helps build
new ways to support people*

- Collecting aggregate information
 - Identifying trends and gaps in services
 - Data and experiences will help shape supports to fit needs of vulnerable Alaskans now and in the future

Changes to CIR policy and Form

- Effective March 1, 2011
- New [Policy and form](#)
- You will receive a copy of all training materials
- Agencies train staff in CIR

What is a Critical Incident?



A critical incident stands out from what you already know about the person and what you already do to support him or her.

- [CIR form](#) has a list of incident categories that require reporting
- A significant event or episode that is out of the ordinary
- Not addressed by interventions described in the care plan

Safety concerns



Critical Incident
occurs

Quick Reference Guide

Safety Concerns

- Missing person when law enforcement is involved
- Harm to self or others when the intervention escalates to a point beyond the treatment/service plan
- Use of restrictive interventions

Safety concerns

Safety Concerns

- Use of restrictive interventions
 - Imminent danger to self or others (crisis response)
 - And non-crisis response
 - Interventions applied outside of a service plan
 - As permitted by policy, but resulting in the need for medical intervention

Medical Events

- Medical Events
 - Death of a participant with a service plan or in care of an agency
 - Report all deaths using the CIR process
 - Include description of circumstances
 - For end of life care, follow service plan

Medical Events

Accident or incident occurring during service provision

- Including medication errors
- That results in injury or change in condition requiring medical intervention
- Medication error in a 24 hr care setting, whether medication is self administered or assistance is given by staff under nursing delegation

Examples of Medication Errors

- Person taking or being assisted to take medication
 - Time other than scheduled
 - Not prescribed route
 - Medication not intended for recipient
 - Medication given to another person
 - Incorrect dosage

Now, or after March 1, 2011

- Use the current form
- [Found on the website](#)
- Includes reporting **RESTRICTIVE INTERVENTIONS**
- Asks for more specific info regarding death
- Continue to turn in to Quality Assurance

People served and CIRs

- CIRs are submitted for anyone in services who has a service plan (care plan)
 - Waiver, Grant, General Relief, and PCA
- CIRs do not replace mandatory reporting to APS and OCS
 - Reporting to Assisted Living Licensing required per ALL policy and procedure

Who can make a CIR?

- Anyone who
 - Witnesses an event or circumstance
 - Becomes aware of an event of circumstance
 - Administrators/supervisors
 - [SDS website link](#) to form and CIR info
 - Fills out SDS Critical Incident Report form
 - Fax: (907) 269-3690
 - email hss.dsdsqa@alaska.gov
 - Use file transfer encryption for private info

CIR form


- CIR form is available at <http://www.hss.state.ak.us/dsds/docs/CritIncRepSDS15-1.pdf>
- Changes can be saved
- Fill out all known info, include source if not first hand observer

CIR Process

CIR/CIIP process graphic

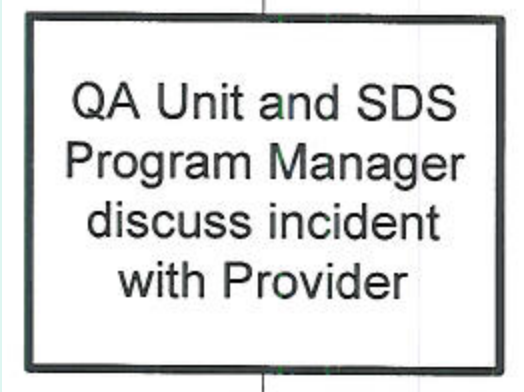


CIR Process



Provider response
satisfactory per
health and safety of
individual(s) served?

- Discuss incident and Provider response



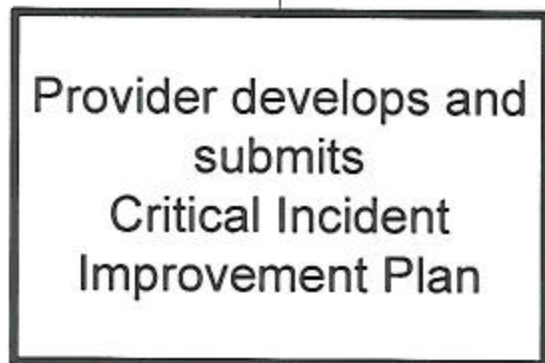
QA Unit and SDS
Program Manager
discuss incident
with Provider

- If response satisfactory per health and safety of recipient(s), no further action necessary

CIIP Process



- If health and safety issues still present, SDS Program Manager may:
 - Request additional info
 - Visit the site
 - interview staff
 - assess Provider documents such as reports related to CIR, Provider P and P, staff credentials and training



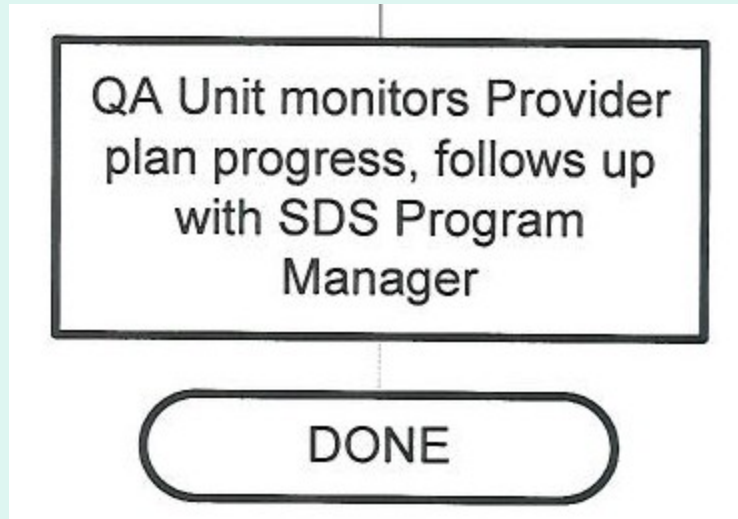
- SDS Program Manager may request Provider develop and submit CIIP

CIIP Specifics

Provider develops and
submits
Critical Incident
Improvement Plan

- SDS Program Manager and QA consult with Provider to determine specific improvement plan
- Provider develops CIIP
- CIIP to include
 - Preventative actions
 - Provider response improvements
 - Date these actions will start
 - Provider staff responsible
 - [Sample CIIP](#)

CIIP Process



- Maintain CIR database
- Monitor Provider assistance
 - Requests for info
 - CIIP completions
- Use data for research and analysis
- Aggregate data used for risk management methods
 - Track and trend incident patterns
 - Evaluate CIIP and other assistance effectiveness
 - Look for areas to improve quality within SDS and Providers

Thank you!



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Series

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