

Quality Improvement

QuickTip

#2

Critical Incident Reporting All Levels of Care: 0711-02

Critical Incident Reporting (CIR) is an important ongoing monitoring tool to assess network and case-specific Member safety issues. CBHNP's policy closely mirrors the reporting requirements and categories outlined by DPW. Refer to incident types defined in CBHNP Policy and Procedure PR-008, available at www.cbhnp.org.

Providers are required to report critical incidents to CBHNP within 24 hours of the time they become aware of the occurrence. Over time, some providers have become less responsive to this requirement. While CBHNP is pleased to receive reports, delayed or inconsistent reporting often leads to missed reporting of incidents, duplication in reporting and an absence of important information which could impact a Member's quality of treatment. Providers are required to develop written policies and procedures for an incident management process that includes proper documentation of critical incidents and timely submission to CBHNP.



Reminders for writing and submitting critical incident report . . .

1. Consider using CBHNP's reporting form which provides all the necessary information for our review and follow up. CBHNP will email the CIR form in a Word document upon request. Alternate forms can be accepted if they have all the information requested by CBHNP.
2. All submissions must include two forms of Member identification. A birth date, MAID, or Social Security number are needed along with a Member name for proper identification.
3. Reports need to be legible to avoid requests to re-submit.
4. When faxing reports, be sure the print is dark enough to be legible.
5. If the space on the form is not sufficient to clearly explain the event and follow up, please use a separate sheet with the Member's name and ID on the top.
6. Submit the report within 24 hours of the incident or the time when the Provider becomes aware of the incident.