

| CARE-CID-HCS | Critical Inci | dent Data (Actio | on Code 68 | 6) | Revised 9/09 |
|--|--------------------------|------------------|------------|---------------|--------------|
| Component Code | | Contract Number | er 🔲 | | |
| Incident Month/Year | MM YYYY | | | | |
| Type of Entry | Add: C | hange: | Delete: | | |
| Reporting Period | for all fields should | reflect one mon | th. | | |
| Total Number of | : | | | | |
| Medication E | rrors | | | | |
| Serious Injuries | | | | | |
| Behavior Inte | rvention Plans Authorizi | ng Restraint | | | |
| Number of Emer | RSS | SL | Other | Total | |
| Personal Restraints | | | | | |
| Mechanic | | | | | |
| Psychoac | | | | | |
| Number of Individuals Requiring Emergency Restraint: | | | | | |
| Personal | | | | | |
| Mechanic | | | | | |
| Psychoac | | | | | |
| Number of Restra | aint Related Injuries: | | | | |
| Emergen | | | | | |
| Emergen | cy Mechanical Restraint | s | | | |
| Emergen | tion | | | | |
| | | | | | |
| Completed by: | | | Г | D ate: | |

Critical Incident Data (CARE-CID)

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|---|------|---|--|--|
| Field Name | Type | Contents | | |
| COMPONENT CODE | R | Component code. | | |
| INCIDENT MONTH AND YEAR | R | Month and year of the critical incident. MMYYYY format. | | |
| CONTRACT NUMBER | R | Contract number. For General Revenue contracts, enter GR followed by component code. | | |
| Type of Entry | | | | |
| ADD | O/R | Check this box to add critical incident data. | | |
| CHANGE | O/R | Check this box to change critical incident data previously entered. | | |
| DELETE | O/R | Check this box to delete critical incident data previously entered. | | |
| Total Number of MEDICATION ERRORS | R | A medication error is reported when there is a discrepancy between what a physician prescribes and what an individual actually takes and the individual self-administers medication under supervision of the Program Provider or has medication administered by the Program Provider. A medication error occurs in one of three ways: Wrong medication - an individual takes medication that is not prescribed for that individual. This includes taking medication after it has been discontinued or taking the incorrect medication because it was inappropriately labeled. Wrong dose - an individual takes a dose of medication other than the dose prescribed. Omitted dose - an individual does not take a prescribed dose of medication within one hour before or one hour after the prescribed time, except an omitted dose does not include an individual's refusal to take medication. | | |
| Serious Injuries | R | A serious physical injury is reported, regardless of the cause or setting in which it occurred, when an individual sustains: • a fracture; • a dislocation of any joint; • an internal injury; • a contusion larger than 2½ inches in diameter; • a concussion; • a second or third degree burn; • a laceration requiring sutures; or • an injury determined serious by a physician, physician assistant, registered nurse, or a vocational nurse. | | |
| BEHAVIOR INTERVENTION PLANS AUTHORIZING RESTRAINT | R | A behavior intervention plan is reported if it authorizes a personal, mechanical or psychoactive medication, as defined below, for an individual. Personal restraint - the application of pressure, except physical guidance or prompting of brief duration that restricts the free movement of part or all of an individual's body. Mechanical restraint - the use of a device that restricts the free movement of part or all of an individual's body. Such a device includes an anklet, a wristlet, a camisole, a helmet with fasteners, a mitt with fasteners, a posey, a waist strap, a head strap, and a restraining sheet. Such a device does not include one used to provide support for functional body position or proper balance, such as a wheelchair belt, or one used for medical treatment, such as a helmet to prevent injury during a seizure. Psychoactive medication - the use of a chemical, including a pharmaceutical, through topical application, oral administration, injection, or other means, to control an individual's activity and which is not a standard treatment for the individual's medical or psychiatric condition. | | |
| Number of Emergency Restraints Used | | Number of emergency restraints used by category during the report month for each of the following types of restraints. Note: The breakdown is based on the type of residence in which the individual resides and is not intended to capture where the restraint occurred. | | |
| PERSONAL RESTRAINTS | R | An emergency personal restraint is reported when the Program Provider uses a personal restraint, as defined above, and such restraint is not authorized in a written behavior intervention plan approved by the individual's IDT. | | |
| MECHANICAL RESTRAINTS | R | An emergency mechanical restraint is reported when the Program Provider uses a mechanical restraint, as defined above, and such restraint is not authorized in a written behavior intervention plan approved by the individual's IDT. | | |

PSYCHOACTIVE MEDICATION An emergency psychoactive medication is reported when the Program Provider uses a psychoactive medication, as defined above and such restraint is not authorized in a written behavior intervention plan approved by the individual's IDT.

Example:

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- John is in Residential Support Services and has had four personal restraints in a month. You would enter **4** in the PERSONAL RESTRAINTS: RSS field.
- Sally is in Supervised Living and has had two personal restraints in a month. You would enter 2 in the Personal Restraints: SL field, and
- Enter 6 in the TOTAL field.
- Bob is in Residential Support Services and has had two mechanical restraints in a month. You would enter **2** in the MECHANICAL RESTRAINTS: RSS field and **2** in the TOTAL field.

Number of Individuals Requiring Emergency Restraint

Number of individuals requiring emergency restraint by category during the report month for each of the following types of restraints. An individual is reported as requiring emergency restraint if the individual is restrained (by either personal or mechanical restraint or psychoactive medication) at least once during a calendar month. If an individual is restrained more than once during a calendar month, the individual is reported only once for that month.

<u>Note</u>: The breakdown is based on the type of residence in which the individual resides and is not intended to capture where the restraint occurred.

PERSONAL RESTRAINTS

An emergency personal restraint is reported when the Program Provider uses a personal restraint, as defined above, and such restraint is not authorized in a written behavior intervention plan approved by the individual's IDT.

MECHANICAL R RESTRAINTS An emergency mechanical restraint is reported when the Program Provider uses a mechanical restraint, as defined above, and such restraint is not authorized in a written behavior intervention plan approved by the individual's IDT.

PSYCHOACTIVE R
MEDICATION

An emergency psychoactive medication is reported when the Program Provider uses a psychoactive medication, as defined above and such restraint is not authorized in a written behavior intervention plan approved by the individual's IDT.

Example:

Even though John has had 4 and Sally has had 2 personal restraints, this field is counting individuals, so you would enter 1 in the PERSONAL RESTRAINTS: RSS field, 1 in the SL field, and 2 in the TOTAL field. Bob has had two mechanical restraints, but you would enter 1 in the MECHANICAL RESTRAINTS: RSS field and 1 in the TOTAL field.

Number of Restraint Related Injuries

Number of restraint related injuries by category during the report month for each of the following types of restraints. A restraint related injury is a serious injury sustained by an individual that is clearly related to the application of a personal restraint, an emergency mechanical restraint, or an emergency psychoactive medication administered to an individual. Reportable injuries in this category are not due to self-injury that occurred prior to the application of restraint. Serious injuries sustained during the application of a restraint that are investigated by DFPS as an allegation of abuse, neglect or exploitation must be included in CIRS reporting for this category.

<u>Note</u>: The breakdown is based on the type of residence in which the individual resides and is not intended to capture where the restraint occurred.

PERSONAL RESTRAINTS R

An emergency personal restraint is reported when the Program Provider uses a personal restraint, as defined above, and such restraint is not authorized in a written behavior intervention plan approved by the individual's IDT.

MECHANICAL R RESTRAINTS An emergency mechanical restraint is reported when the Program Provider uses a mechanical restraint, as defined above, and such restraint is not authorized in a written behavior intervention plan approved by the individual's IDT.

PSYCHOACTIVE R MEDICATION An emergency psychoactive medication is reported when the Program Provider uses a psychoactive medication, as defined above and such restraint is not authorized in a written behavior intervention plan approved by the individual's IDT.

Example

One of Bob's restraints resulted in a restraint related injury, so you would enter **1** in the MECHANICAL RESTRAINTS: RSS field and **1** in the TOTAL field.

COMPLETED BY R Signature of person completing the form and date the form is completed.

CARE-CID (HCS) September 2009 CARE System