CARE

Client Assignment and Registration System
Texas Department of Mental Health and Mental Retardation

CARE-CID-TxHmL/ICFMR	**Critical Incident Data** (Action Code 686)	Revised 9/09

Component Code ☐☐☐   Contract Number ☐☐☐☐☐☐☐☐☐

Incident Month/Year ☐☐☐☐☐☐
                    MM   YYYY

Type of Entry   Add: ☐   Change: ☐   Delete: ☐

Reporting Period for all fields should reflect one month.

Total Number of:

Medication Errors _____

Serious Injuries _____

Behavior Intervention Plans Authorizing Restraint _____

Number of Emergency Restraints Used   **Total**

Personal Restraints _____

Mechanical Restraints _____

Psychoactive Medication _____

Number of Individuals Requiring Emergency Restraint:

Personal Restraints _____

Mechanical Restraints _____

Psychoactive Medication _____

Number of Restraint Related Injuries:

Emergency Personal Restraints _____

Emergency Mechanical Restraints _____

Emergency Psychoactive Medication _____

Completed by: _____   Date: _____

Critical Incident Data (CARE-CID)

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		Total number of emergency restraints used by category during the report month for each of the following types of restraints.
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	R	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.

Number of Individuals Requiring Emergency Restraint		Total 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.
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	R	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.
Number of Restraint Related Injuries		Total 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.
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	R	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.
COMPLETED BY	R	Signature of person completing the form and date the form is completed.