

Critical Incident, Deaths, Seclusion and Restraints Reporting Quarterly Review

Instructions

Purpose:

As required by 10A NCAC 27G.0600, Area Authorities/County Program must review all Critical Incident and Death Reports submitted to them by service providers in their catchment areas and report on that review no less than quarterly to the Division of Mental Health, Developmental Disabilities, and Substance Abuse Services.

Additionally, as required by 10A NCAC 27E.0104 (18), Area Authorities/County Programs are to analyze collected information from service providers on the use of seclusion and restraint and report it to DMH/DD/SAS when requested. These quarterly reports should allow the area authority, consumers, the public, and the NC Division of Mental Health, Developmental Disabilities, and Substance Abuse Services to assess trends and patterns of critical incidents, deaths, and the use of seclusion and restraint and support efforts to improve the quality of care delivered.

Who Must Submit the form:

Area Authorities/County Programs must submit a report reviewing Critical Incidents, Deaths, Restraints and Seclusion as required by 10A NCAC 27G.0600 and 10A NCAC 27E.0104 (18).

What to File:

All of the information in the prepared form must be submitted by the local authority. The information requested on the form falls into four categories. The data should include all reported incidents and deaths and all reported uses of seclusion and restraint irregardless of whether these have previously been reported to the State immediately following incidents.

- Numbers of reported critical incidents/deaths in total and by various types noted on the form including deaths; cases of abuse, neglect, or exploitation; medication errors; injury requiring treatment by physician; use of restraint or seclusion; and other incidents.
- Total numbers of providers reporting critical incidents or deaths.
- Total numbers of clients and uses of restraint and seclusion reported by providers. This should include all such uses, not just those reported on the critical incident and death reports.
- Examples of how the area authority is using the Critical Incident and Death Reporting and Seclusion and Restraint Reporting information to monitor and manage the quality of care being provided.

Critical Incident, Deaths, Seclusion and Restraints Reporting Quarterly Review

Instructions

When to File:

All Critical Incident Reports received by your agency must be reviewed as they are received. The quarterly review is to be done every three months, 20 days after the end of the quarter. The following table describes the months covered and the due dates for the four quarterly reports for fiscal year 2003-2004.

Report	Months Covered	Due Date
First Quarter FY0304	July, August and September 2003	November 20, 2003 Due Date Extended by one Month for startup
Second Quarter FY0304	October, November, and December 2003	January 20, 2004
Third Quarter FY0304	January, February, and March 2004	April 20, 2004
Fourth Quarter FY0304	April, May, and June 2004	July 20, 2004

How to File:

The quarterly report form may be completed on paper or sent in electronically from the prepared WORD template or an alternate equivalent electronic format.

Electronic copies of the completed form, the WORD template or alternate equivalent, may be emailed to:

Email: contactdmhquality@ncmail.net

Paper copies of the completed form may be mailed or faxed to:

Candy Helms
Quality Management Team
Community Policy Management Section
Division of MH/DD/SAS
North Carolina Department of Health and Human Services
3004 Mail Service Center
Raleigh, NC 27699-3004

FAX: 919-715-3604
Phone: 919-733-0696