

Behavioral Health Critical Incident (BHCI) Reporting Incident Category Descriptions

1. Any Event Requiring Emergency Services of the Fire Department or Law Enforcement Agency

- a. Act of Violence
- b. Criminal Charge/Arrest
- c. Fire
- d. Flood
- e. Misappropriation of Individual Property (i.e., theft, embezzlement, or other unauthorized use of another's property)
- f. Police Called without a Charge or Arrest
- g. Victim of a Crime
- h. Vandalism

• Non-Reportable Events:

- Non-emergency services of the fire department or law enforcement agency.
- o Police presence related to commitment procedures or rescue squad activities.
- Testing of alarm systems/false alarms, or 911 calls by individuals that are unrelated to criminal activity or emergencies.
- Presence of law enforcement personnel during any activity governed by the Mental Health Procedures Act.

2. Abuse/Assault

Occurrence of the infliction of injury, unreasonable confinement, intimidation, punishment, mental anguish, or sexual abuse. For the purposes of reporting, abuse includes abuse or assault of individuals by staff or abuse or assault of individuals by others. Depending on the nature of the abuse or assault, it may also constitute a crime reportable to police. Allegations of abuse or assault are also to be reported. This includes the following:

- a. Physical Abuse/Assault Intentional physical acts by staff or other person which causes or may cause physical injury to an individual. Examples of injuries present with physical abuse include, but are not limited to:
 - A patterned bruise, no matter its size, that is in the shape of an identifiable object such as a belt buckle, shoe, hanger, fingermark, etc.
 - Unexplained serious injuries or multiple bruises, cuts, abrasions.
 - A spiral fracture.
 - o Dislocated joints.
 - Bilateral bruising, which is bruising on both sides of the body (e.g. the top of both shoulders, both sides of the face or inside of both thighs).
 - Bruising to an area of the body which does not typically or easily bruise (e.g. midline stomach, breasts, genitals, inner thighs or middle of the back).
 - o Injuries that are not consistent with what is reported to have happened.
 - Injuries explained as caused by self-injury to parts of the body the individual has not



previously injured or cannot access.

- b. **Psychological Abuse** Acts including verbalizations, which may emotionally harm, invoke fear or humiliate, intimidate, degrade or demean an individual. Examples include, but are not limited to:
 - Bullying, rejecting, degrading, and terrorizing acts.
 - Disregard for privacy during personal care.
 - Active ignoring (that is not part of an approved plan) such as ignoring a call or request for help/assistance, or passive ignoring, such as non-essential use of a cellphone (or other electronic device), watching TV, etc.
 - Threats of isolation.
 - Yelling, name-calling, blaming, and shaming.
 - Mimicking or mocking an individual's voice, speech, behaviors, etc.
 - Statements that are intended to humiliate or infantilize, including insults, threats of abandonment or institutionalization and other controlling, dominant or jealous behavior.
 - The act of taking, transmitting, or displaying an electronic image (in any medium including social media, personal computers, cell phones, etc.) of an individual that is intended to shame, degrade, humiliate, or otherwise harm the personal dignity of the individual.
 - When an individual witnesses an incident for which they were not the intended victim, but it causes or has caused mental or emotional anguish.
- c. Sexual Abuse/Assault Acts or attempted acts such as rape, sexual molestation, sexual harassment and inappropriate or unwanted touching of a sexual nature of an individual by another person. Any sexual contact between a staff person and an individual is abuse, and examples of methods used to commit sexual abuse include.
- d. **Exploitation** The practice by a caregiver or other person of taking unfair advantage of an individual for the purpose of personal gain, including actions taken without informed consent or with consent obtained by misrepresentation, coercion or threats of force. This could include inappropriate access to or the use of an individual's finances, property and personal services.

Non-Reportable Events:

- Altercations among individuals that may result in physical contact but do not cause serious injury and which do not reflect a pattern of physical intimidation or coercion of a individual.
- Discord, arguments, or emotional distress resulting from normal activities and disagreements that can be found in typical congregate living situations.

3. Death

All deaths regardless of cause/manner or perpetrator. These include those known or suspected to be caused by:

- Accident
- Natural/Medical
- Overdose
- Suicide
- Homicide
- Other



4. Illness of an Individual (While at Provider Site Requiring Medical Attention)

Any life-threatening illness, any involuntary emergency psychiatric admission, or any illness that appears on the Department of Health's List of Reportable Diseases (under 28 PA Code Chapter 27 relating to communicable and non-communicable diseases), including those appearing on the DOH list as the subject of voluntary reporting by the Center for Disease Control and Prevention (reports are only needed when the diagnosis is initially diagnosed). It should be noted whether the illness required **inpatient services** (e.g., emergency room, hospital admission) or **outpatient services** (e.g., primary care, urgent care).

If the illness is <u>caused by a preceding event/incident</u>, use that incident category <u>instead</u>, such as:

- Abuse/assault
- Neglect
- Non-fatal overdose
- Non-fatal suicide attempt
- Seclusion or restraint
- Significant medication error

Non-Reportable Events:

- Scheduled treatment of medical conditions, on an outpatient or inpatient basis.
- Any voluntary inpatient admission to a psychiatric facility or service at a crisis facility or psychiatric department of acute care hospitals for the purpose for evaluation and/or treatment.
- Emergency room visit or inpatient admission that result from an individual's previously diagnosed chronic illness, where such episodes are part of the normal course of the illness
- Emergency room visit where the visit is necessitated because of the unavailability of the individual's primary care physician.

5. Injury of an Individual (While at Provider Site Requiring Medical Attention)

When an individual requires medical treatment more intensive than first aid for an injury that occurred while the member was on the provider's property. It should be noted whether the injury required **inpatient services** (e.g., emergency room, hospital admission) or **outpatient services** (e.g., primary care, urgent care). First aid includes assessing a condition, cleaning a wound, applying topical medications, and applying simple bandages. Medical attention greater than first aid includes the following:

- Chest pain and difficulty breathing, and/or other symptoms of a heart attack
- Chronic illnesses, such as cancer, heart disease, and diabetes
- Communicable illnesses outlined under the PA Code Chapter 27, such as animal bites and rabies, chickenpox, cholera, food poisoning, hepatitis, lead poisoning, HIV/AIDS, measles/rubeola, meningitis, mumps, and tuberculosis.
- Fever over 103 degrees or with a rash
- Fractured, cracked, dislocated, or broken bones or teeth
- Head injuries, loss of consciousness, severe dizziness, fainting, and/or confusion
- Hypothermia or hyperthermia
- Loss of sight, hearing, or mobility
- Seizures



- Severe, blistering burns
- Severe abdominal pain
- Weakness or numbness on one side of the body, and/or other symptoms of a stroke
- Wounds that have uncontrolled bleeding or are large enough to require stitches

If the injury is caused by a preceding event/incident, use that incident category instead, such as:

- Abuse/assault
- Neglect
- Non-fatal overdose
- Non-fatal suicide attempt
- Seclusion or restraint
- Significant medication error

• Non-Reportable Events:

- Minor injury handled on-site by first aid (e.g., minor cuts, scrapes, scratches, blisters, or burns; conditions such as headaches or stomachaches).
- o Scheduled treatment of medical conditions, on an outpatient or inpatient basis.

6. Missing Person

Any individual who is out of contact with staff without prior arrangement for more than 24 hours. A person may be considered in "immediate jeopardy" based on his/her personal history and may be considered missing before 24 hours elapse. It is considered a reportable incident whenever police are contacted about a missing person or the police independently find and return an individual, regardless of the amount of time missing.

- a. Elopement from Facility or Facility-Supervised Activity: A child, adolescent, or adult who leaves or is absent from an inpatient, residential, or school facility premises or the premises of a facility supervised activity (e.g., outing off facility premises that is directly supervised or managed by staff, such as an outing to a restaurant, store, or park with staff) without approval of staff.
- **b.** Elopement while on Non-Facility-Supervised Therapeutic Leave/Pass/Outing: A child, adolescent, or adult who is absent from an inpatient, residential, or school facility-approved therapeutic leave, pass, or outing that is NOT directly supervised or managed by staff (e.g., home pass with family from an inpatient or residential setting).

c. Other Reportable Missing Person:

- A child, adolescent, or adult who is out of contact with staff without prior arrangement or who
 may be in "immediate jeopardy" based on their personal history. This category is relevant to
 all services.
- Any time law enforcement is contacted about a missing person or law enforcement independently find and return the child, adolescent, or adult regardless of the time he or she was missing. This category is relevant to all services.

Non-Reportable Events:



- An individual is on an approved therapeutic leave/pass/outing from a residential or inpatient setting, facility/staff-supervised or not.
- An individual did not show for or did not make themselves available for their scheduled appointment.

7. Neglect

The failure to obtain or provide needed services and supports defined as necessary or otherwise required by law, contract, or regulation. This can include the failure to provide for needed care such as shelter, food, clothing, personal hygiene, medical care and protection from health and safety hazards.

8. Non-Fatal Overdose

The occurrence of an individual taking too much of a drug, alcohol, or medication leading to life-threatening overdose or poisoning which requires medical treatment and/or where the individual suffers or could have suffered significant injury or death.

9. Non-Fatal Suicide Attempt

The intentional and voluntary attempt to take one's own life. A suicide attempt is limited to the actual occurrence of an attempt which requires medical treatment and/or where the individual suffers or could have suffered significant injury or death.

Non-Reportable Events:

- Threats of suicide, including suicidal ideation, which do not result in an actual attempt.
- Gestures, which clearly do not place the individual at risk for serious injury, death or require any medical attention.
- Actions, which may place the individual at risk but where the individual is not attempting harm to himself/herself.

10. Restraint (Requiring Medical Attention)

Any use of restraints as defined by MH Bulletin, "OMHSAS 02-01, The Use of Seclusion and Restraint in MH Facilities and Programs" that led to physical injury or illness requiring medical attention beyond first aid. These include:

- a. Chemical Restraint (federal term: "drug used as a restraint") is a medication used to control acute, episodic behavior that is not the standard treatment for the individual's medical or psychiatric condition, and is intended to significantly lower the individual's level of consciousness and restricts the movement of an individual. Examples of reportable incidents include injury or illness from acute use of chemical restraint medications such as oral, intramuscular, or intravenous medications/injections of benzodiazepines (e.g., lorazepam, midazolam) or antipsychotics (e.g., haloperidol, droperidol, risperidone, olanzapine, ziprasidone).
- **b. Manual Restraint** is a physical hands-on technique that restricts the movement or function of the individual's body or portion of the individual's body. Examples of reportable incidents include any injury or illness from a physical/manual/hands-on, for example one that inhibits digestion or respiration, inflicts pain, causes embarrassment or humiliation, causes hyperextension of joints,



applies pressure on the chest or joints or allows for a free fall to the floor.

c. Mechanical Restraint is a device used to control acute, episodic behavior that restricts movement or function of an individual or portion of an individual's body. Examples of mechanical restraints of this nature include injury or illness from use of handcuffs, straps, blanket wraps, cloths, or other types of restraints positioned around the head, wrists, elbows, knees, ankles, feet, or other portion of the body.

Non-Reportable Events:

- A medication ordered by a physician as part of the ongoing individualized treatment plan for treating the symptoms of mental, emotional, or behavioral disorders is not a chemical restraint.
- Mechanical restraints do not include measures to promote body positioning to protect the individual and others from injury, or to prevent the worsening of a physical condition. Devices also used for medical treatment such as helmets for prevention of injury during seizure activity, mitts, and muffs to prevent self-injury are not considered restraints.
- Prompting, escorting or guiding an individual who does not resist to assist in the activities of daily living is not a manual restraint.

11. Seclusion

Any use of seclusion as defined by MH Bulletin, "OMHSAS 02-01, The Use of Seclusion and Restraint in MH Facilities and Programs". Seclusion is restricting a child, adolescent, or adult in a locked room, and isolating the individual from any personal contact. The term "locked room" includes any type of door locking device such as a key lock, spring lock, bolt lock, foot pressure lock or physically holding the door closed, preventing the individual from leaving the room. Locking an individual in a bedroom during sleeping hours is considered seclusion.

12. Significant Medication Error (Requiring Medical Attention)

A missed medication, incorrect medication, or incorrect dosage where a member suffers an adverse consequence that is either short or long term in duration and/or receives treatment to offset the effects of the error.

Non-Reportable Events:

o Refusal by the individual to take prescribed medication.

13. Other

Any other incident of a serious nature not detailed in the other incident types.