Training for Critical Incident Reporting
Agenda

• Overview
• Critical Incident Definitions and Reporting Process
• General Requirements and Resources
• Contact Us
Critical Incident Definitions and Reporting Process
Iowa Administrative Code

• The Iowa Administrative Code (IAC) defines major and minor incidents involving members who receive habilitation services or care under a HCBS waiver and how to report an incident.

• The incident definitions and reporting timelines are the same for all care providers within a managed care organization like UnitedHealthcare Community Plan.

• We provide training about major and minor incidents to help ensure they are appropriately reported, reviewed and monitored as part of an overall patient safety program.
CIR Process

The CIR process helps:

• Identify areas of improvement among care providers, facilities and other health care practitioners.
• Improve overall quality of care provided to members.
• Reduce the probability of future critical incidents.
• Comply with the IAC.

More information on the critical incident reporting process is available in the IAC Chapter 77.
Minor Incident Definition

A **minor incident** is an occurrence involving a member that results in:

- Bruising
- Injury to self, to others, or to property but no physician or hospital treatment is needed
- Prescription medication error
- Requiring basic first aid
- Seizure activity
Minor Incident Reporting

• When a minor incident occurs or a staff member becomes aware of one, the staff member involved must submit a completed incident report to their supervisor within 72 hours of the incident.
• When reporting a minor incident, staff should follow the process or protocol adapted by their agency or department.
• Minor incidents may be reported in any format designated by the care provider.
• The care provider must keep the completed report in a centralized file with a notation in the member’s file of the minor incident.
Major Incident Definition

A **major incident** is an occurrence involving a member that results in:

- Physical injury to or by the member that requires a physician’s treatment or admission to a hospital
- Death of any person
- Emergency mental health treatment for the member
- Law enforcement intervention
- Child abuse reporting under Iowa Code section 232.69
- Dependent adult abuse reporting under Iowa Code section 235B.3
- Prescription medication error or a pattern of medication errors leading to an outcome identified in the first three bullets.
- Member’s location not being known by care provider staff who are assigned protective oversight
  - This situation occurs when services or supervision by care provider staff is to be given or is scheduled for a member.
Major Incident Reporting

Who reports?

• Case managers, or targeted case managers who work with a member on a specific diagnosis
• Community-based case managers
• Staff member or staff member’s supervisor
• Services providers
• Integrated health home care coordinators
• Service workers who are employed by an HCBS or habilitation services care provider such as a custodian

Who doesn’t report?

• Consumer Choice Options service providers
• Home and vehicle modification providers
• Personal emergency response system providers
• Transportation providers
Major Incident Reporting (Cont.)

When to report?
The incident must be reported by the end of the next calendar day.

What to report?

- Name of the member involved
- Date and time incident occurred or was discovered
- Description of incident
- Names of others present or involved
- Action the agency or care provider took to manage incident
- Resolution or follow-up
Major Critical Incidents Resolution and Follow-Up

- A UnitedHealthcare Community Plan critical incident nurse will review the critical incident report and determine whether it meets the IAC’s definition of a major critical incident and then oversee the investigation.
- We will complete the investigation within 30 calendar days of notification including any indicated follow-up required by the care provider.
- As part of the investigation, the critical incident nurse may work with other UnitedHealthcare Community Plan service areas such as Care Coordination to be sure the member’s needs are being addressed.
General Requirements and Resources
General Requirements

• Use CIR 470-4698 form to report **major** incidents.
• Use a separate form for each distinct major incident and one for each member involved.
• Include clear and concise information.
• Complete the form with information available at the time of report.
• If you need to submit additional information, please use the CIR form and check the “Additional Information Added” box at the top of the form.
• Please submit the completed form:
  o By faxing it to 855-371-7638
  o By emailing critical_incidents@uhc.com
Member Eligibility Determination

- Please confirm the individual’s enrollment with UnitedHealthcare Community Plan before submitting a CIR Form.
- Verify that the individual was a UnitedHealthcare Community Plan member when the incident occurred, not when it was discovered because these dates may differ.
- If the individual was a UnitedHealthcare Community Plan member when the incident occurred, please complete the CIR form and send it to us:
  - By faxing it to 855-371-7638
  - By emailing critical_incidents@uhc.com
Resources

- This training is available at UHCprovider.com/IAprovider > Provider Training > Critical Incident Report Process Training.
- The CIR form and user guide are also available at UHCprovider.com/IAprovider > Provider Forms and Reference Guides > Iowa Department of Human Services Forms.
  - Select the Critical Incident Reporting Form.
  - If you need help completing the form, refer to the CIR Form User Guide.
Contact Us

If you need help accessing, completing or submitting the CIR form, please contact us:
• By calling Provider Services at 888-650-3462
• Emailing critical_incidents@uhc.com
Thank you.