

# ***WHAT IS A CRITICAL INCIDENT?***

***Suspected Abuse***

***Suspected Self Abuse***

***Suspected Neglect***

***Suspected Self-Neglect***

***Exploitation***

***Abandonment***

***Death***

***Intimidation***

***Sexual Abuse***

***Police Involvement***

***Crime***

***Injuries***

***Serious Injury***

***Elopement***

***Medication Error***

***Emergency Use of Restraints***

***Medical/Behavioral Admission***

***Use of Restraints***

***Other Injury***

# Critical Incident Definitions

**Suspected ABUSE** is defined as intentionally or recklessly inflicting physical or mental injury, unreasonable confinement, intimidation, cruel punishment and may include sexual offenses.

**Suspected SELF ABUSE** is characterized as abuse (Intentionally or recklessly inflicting physical or mental injury, unreasonable confinement, intimidation, cruel punishment and may include sexual offenses) inflicted by self.

**Suspected NEGLECT** is defined as the act of depriving a vulnerable adult of the minimum food, shelter, clothing, supervision, physical and mental health care, and other care necessary to maintain life or health, or which may result in a life-threatening situation.

**Suspected SELF-NEGLECT** is when a vulnerable adult is unable, due to physical or mental disability, or refuses to perform essential self-care tasks, including providing essential food, clothing, shelter, or medical care, obtaining physical or mental health care, emotional well-being and general safety, or managing financial affairs.

**EXPLOITATION** is defined as the reckless or intentional act taken by any person, or any use of the power of attorney, conservatorship or guardianship of a vulnerable adult, to obtain control through deception, harassment, intimidation or undue influence over the vulnerable adult's money, assets, or property with the intention of depriving the vulnerable adult of those assets, or to intentionally misuse the principal's property, and in so doing, adversely affect the principal's ability to receive healthcare or pay bills for basic needs or obligations.

**ABANDONMENT** is defined as leaving a vulnerable adult without financial support or the means or ability to obtain food, clothing, shelter or health care.

**Participant DEATH** due to any cause.

**INTIMIDATION** is defined as the communication by word or act to a vulnerable adult that he, his family, friends or pets will be deprived of food, shelter, clothing, supervision, prescribed medication, physical or mental health care and other medical care necessary to maintain a vulnerable adult's health, financial support or imply that they will suffer physical violence.

**SEXUAL ABUSE** means sexual contact including, but not limited to, unwanted touching, all types of sexual assault or battery as defined in W.S. 6-2-302 through W.S. 6-2-304, sexual exploitation and sexual photographing.

**POLICE INVOLVEMENT** is defined as any incident that results in police involvement with participants, including but not limited to arrests of participants, questioning of participants by law enforcement, or police calls to participant's home or service delivery site.

**CRIME** as defined by the Wyoming Criminal Code.

**INJURIES** caused by restraints, including drugs used as restraints, physical restraints, and mechanical restraints.

**SERIOUS INJURY** An injury, such as suspected fractures, wounds requiring stitches, or injuries due to falls, which requires an emergency room visit, hospital visit, or non-routine visit to a doctor or clinic.

**ELOPEMENT** The unexpected or unauthorized absence of an individual for more than four hours when that person is receiving waiver services or the unexpected or unauthorized absence of any duration.

**MEDICATION ERROR** is an event where a participant is given (1) the wrong medication, (2) the wrong dosage, (3) medication which should have gone to a different participant, (4) medication via an incorrect delivery route (such as oral vs. topical), or (5) medication at the wrong time (by an hour or more from the scheduled time). DFS, P&A, and law enforcement notification is not required for this incident type, but BHD/DDD notification via an incident report is required.

**Emergency USE OF RESTRAINTS** is an unplanned event where restraints were used to restrain a participant.

**MEDICAL/BEHAVIORAL ADMISSION** indicates that the participant was admitted to a Medical or Behavioral care facility for additional treatment. This incident does not require notifications to the various agencies.

**USE OF RESTRAINTS** – any time a physical, mechanical or chemical restraint is deployed on a participant, whether it is an emergency restraint or one that has been ordered by a physician and approved in the plan of care.

**OTHER INJURY** means a visible injury that does not require a doctor's visit.

# ***Now What Do I Do???***

## ***Critical Incident Guideline***

*Per the Adult Protective Services Act (WS 35-20-103): "Any person or agency who knows or has reasonable cause to believe that a vulnerable adult is being or has been abused, neglected, exploited, abandoned or is committing self neglect, shall report the information immediately..." After assuring the health and safety of the participant and other individuals report immediately:*

### ***In Evanston:***

*Upon determining that an incident meets the above standards, staff will:  
Call 911, if immediate medical treatment is needed.*

*Call On-Call Supervisor.*

### ***On-Call supervisor will:***

- Notify Medical Professional, when appropriate.*
- Go to the site of the incident to gather all needed information regarding the incident.*
- Call Case Manager, Program Coordinator and Residential Director.*
- Voicemail the following: CEO/COO, Vice President, Residential Director, Psychologist assigned to Participant, Program Coordinator, and Training Director.*
- If the alleged incident requires staff disciplinary action or reassignment, On-Call supervisor will contact the Vice President, Residential Director or Human Resources Director to determine needed staff action.*

### ***Program Coordinator or designee will:***

- Review the incident to determine if it meets the criteria as a Reportable Critical Incident. If the incident is determined to be reportable, the Program Coordinator or designee will complete and send the BHD Initial Notice of Incident Report form and inform the participant's guardian.*
- Notify the following of a report being filed: CEO/COO, Vice President, Residential Director, Training Director, and the participant's Psychologist.*

*DSP needs to document the incident prior to the end of their shift.  
If there is a med error, please follow MRSI Medication Guidelines.*

### ***In Cheyenne:***

*Upon determining that an incident meets the above standards, staff will:*

- Call 911, if immediate medical/behavioral assistance is needed.*
- When situation is controlled, notify Shift Coordinator or On-Call Supervisor.*
- Shift Coordinator/On-Call Supervisor will go to the site of the incident to gather all needed information regarding the incident.*
- Provide follow-up as appropriate.*
- Shift Coordinator/On-Call Supervisor will contact COO, Guardian, Case Manager, and Day Coordinator via phone.*
- The Day Coordinator will pass information to therapists and other need-to-know staff.*

*Complete critical Incident Report on-line from the internet at <https://health.wyo.gov/behavioralhealth/dd/file-incident-report/> click on: "File an Incident Report," or call (307) 777-7115 \* Toll Free (800) 510-0280. This **must be done within 24 hours of incident.** Follow instructions for notifications on form.*

***IT'S YOUR DUTY TO REPORT!***

# ***Suicide Prevention Guideline***

*Learn the warning signs. These signs may mean someone is at risk for suicide. Risk is greater if a behavior is new or has increased and if it seems related to a painful event, loss, or change.*

- *Talking about wanting to die or to kill one-self.*
- *Looking for a way to kill oneself, such as searching online or buying a gun.*
- *Talking about feeling hopeless or having no reason to live.*
- *Talking about feeling trapped or in unbearable pain.*
- *Talking about being a burden to others.*
- *Increasing the use of alcohol or drugs.*
- *Acting anxious or agitated; behaving recklessly.*
- *Sleeping too little or too much.*
- *Withdrawing or feeling isolated.*
- *Showing rage or talking about seeking revenge.*
- *Displaying extreme mood swings.*
- *Asking for help.*

*Suicide is preventable.*

*If a participant shows signs of suicide staff must:*

- *Notify On-Call Supervisor*
- *Follow plan of care*
- *Monitor the participant closely*
- *Complete an Information Report*
- *Call 911 (when appropriate)*

*If a staff member or family member shows signs of suicide:*

- *Call 1-800-273-TALK (8255)*
- *Call 911*