FAQ & TIP SHEET

Serious Incident Report (SIR)

- **What are serious incidents and why do I need to report them?**
    - Incidents that have a direct or indirect impact on the community, patients, staff, and/or the SUD treatment provider agency as a whole and are required to be investigated and evaluated at the provider agency level.
    - Information should be used on a routine basis to improve accessibility, health, and safety, and address other pertinent risk management issues.

- **Why do I need to make a phone report and complete the SIR form?**
    - Phone reporting is essential for notifying QA immediately or within outlined timeframe, which gives providers more time to complete and submit the report.

- **What is the difference between a level one and a level two incident?**
    - Level One Serious Incident - most severe type. A level one incident must include at least one of the following:
        - Any event that has been reported in the media/public domain (television, newspaper, internet), current or recent past, regardless of type of incident.
        - The event has resulted in a death or serious physical injury on the program's premises.
        - The event is associated with a significant adverse deviation from the usual process for providing behavioral health care.
    - Level Two Serious Incident - any serious incident that does not meet the criteria of a Level One serious incident.

- **What is considered a serious physical injury?**
    - Serious physical injury to a client which may require hospitalization where the injury is directly related to the client's mental health or substance use functioning and/or symptoms. Serious bodily injury means **an** injury involving extreme physical pain, substantial risk of death, or protracted loss or impairment of function of a bodily member, limb, organ, or of mental faculty (i.e., fracture, loss of consciousness), or requiring medical intervention, including but not limited to hospitalization, surgery, transportation via ambulance, or physical rehabilitation.

- **What is an unusual occurrence?**
    - Incident that may indicate potential risk/exposure for the County – operated or contracted provider (per Statement of Work), client or community that does not meet the criteria of a serious incident. See OPOH (Section G)/SUDPOH (Section I) for examples.

- **What is the process for reporting?**
    - Telephonic report
        - Level 1 = Immediately
        - Level 2 = within 24 hours of knowledge of incident
    - Complete SIR and submit to QA
        - Level 1 = within 24 hours of knowledge of incident
        - Level 2 = within 72 hours of knowledge of incident

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- **How do I report if the incident happens on a weekend?**
    - Level Two – no change to current reporting requirements
    - Level One – reporting process is under review

- **What is the CME report? Why is it needed and how do I request it?**
    - CME report is the County Medical Examiner's Report. It is required for serious incidents involving death of a client because it provides the final cause of death determination.
    - Contact the Medical Examiner at 858-694-2895 to confirm client's death, date of death and receive CME case number. May ask for preliminary cause of death if known. Document this information in the SIR.
    - Email the Medical Examiner at records.mx@sdcounty.ca.gov. to obtain the CME report. The Medical Examiner will send the program a copy of the final report once it is completed.

- **When is the Root Cause Analysis (RCA) required?**
    - RCA is required for any death by suicide, alleged homicide committed by the client, or as requested by County QA.
    - May be completed for any other serious incident event.

- **What if I'm unsure about the severity level?**
    - Contact QI Matters or the SIR line for a consultation.

- **Where can I find the SIR and SIROF forms?**
    - Forms are located on the MHP and DMC Optum pages with FAQ/Tip Sheets under the "Forms" tab.

- **How do I complete the SIR Form?**
    - Shall be typed; handwritten forms will be returned.
    - All fields shall be complete unless otherwise noted; incomplete forms will be returned.
    - See steps outlined below.

1. Program Reporting SIR - Provide details about program reporting SIR, including staff completing/submitting the SIR form.
    a. Name of Agency/Legal Entity and Program Name
    b. Program Manager info (Name, email, phone)
    c. Program Type – only select one (MH or SUD); see the prompt that states "Click to view/select options" to initiate the drop-down menu.
    d. Name of staff completing SIR and date completed.
    e. Region of program – region is based on program address in San Diego. See the prompt that states "Click to view/select options" to initiate the drop-down menu.
        i. Countywide is limited to certain MH programs and not applicable to SUD.
    f. COR name

2. Incident Severity – Indicate severity level.
    a. Reporting of a serious incident is based on criteria and determined severity of the serious incident.
    b. See definitions above and/or in the OPOH (MH) or SUDPOH (SUD).

3. Phone Reporting – Provide details about when the SIR was reported via SIR Report Line
   a. Date and time SIR was reported the SIR via SIR Report Line

4. Client Information – Provide details about the client involved in the incident.
   a. Client Name
   b. Client's date of birth (DOB)
   c. Client's DSM-5 diagnosis; if none, indicate "none" or "N/A" or appropriate z-code for SUD.
      i. Note: Z-code will not be accepted if client has an identified DSM-5 diagnosis.
   d. Client's record number for CCBH or SanWITS
      i. Note: for programs providing both MH and SUD services, provide both CCBH and SanWITS numbers.
   e. Client's last date receiving a service at the program
   f. Client's Medi-Cal number; if none, check "no"
   g. If client is involved with or connected to other departments/entities such as Probation, Parole, Child Welfare Services, Adult Welfare Services, Public Conservator, other law enforcement, etc, indicate yes or no.
      i. If yes, section 6 must be complete.

5. Incident Information – Provide details about the incident
   a. Date the incident took place
   b. Time the incident took place
   c. Location where the incident occurred
   d. Staff involved in the incident; if none, indicate "none" or "N/A"
   e. Date the incident was reported to the program if information about the incident is received second-hand; if none, indicate "none" or "N/A"
   f. Incident Type – Incidents shall be reported with the leading incident; select the option that best describes the incident; see the prompt that states "Click to view/select options" to initiate the drop-down menu; if "Other" is selected, additional information is required to be entered into the "other" field. Note: If media involved, incident #1 for media should only be selected if no other incident is appropriate.
   g. Indicate if the incident involved media. If yes, additional information is required. Include media links (relevant news articles) for all incidents.

6. Notifications – Notification to other parties/entities of the client's or staff's involvement in an incident may be required. Indicate other departments/parties notified regarding the incident. Multiple notifications may be necessary. If notification is not required, click N/A.
   a. Entity - See the prompt that states "Click to view/select options" to initiate the drop-down menu; if "Other" is selected, additional information is required to be entered into the "other" field.
   b. Date/Time – indicate date/time of the notification
   c. Type of notification - see the prompt that states "Click to view/select options" to initiate the drop-down menu.
   d. NOTE (MH/SUD) – *If a client is involved with APS, CWS, Probation/Parole, Public Conservator, etc, notification to these departments is required*.
   e. NOTE (SUD ONLY) - *The SUD Compliance Division investigates violations of the code of conduct of registered or certified AOD counselors. Alcohol or Drug Abuse Recovery or Treatment Facilities licensed or certified by DHCS are required to report counselor misconduct to DHCS*

within 24 hours of the violation. See [DHCS Substance Use Disorders Services – Complaints](#), for further details about regulations and how to file a complaint with DHCS.

7. Notifications (SUD Residential Only) – SUD Residential Licensing requires reporting for incidents involving death or injury that requires medical treatment, communicable diseases, poisonings, natural disaster, and/or fires ore explosions on premises. If notification is not required, click N/A.
    a. Indicate if death/injury that required medical treatment, communicable diseases, poisonings, natural disaster and/or fires or explosions on the premise.
    b. Indicate date/time the telephonic report was made.
    c. Indicate if written report was submitted.
    d. Indicate date/time of written report.
    e. NOTE: *See [DHCS 5079 titled "Unusual/Incident/Injury/Death Report"](#) for a copy of the DHCS form and directions*

8. Describe the Serious Incident – Describe the incident in detail addressing all items.
    a. Identify people involved (staff, client, community members), precipitating factors which lead to the incident, and details of incident.
    b. Indicate whether the client was admitted for medical or psychiatric care as a result of the incident and where they were admitted.
    c. Describe any physical or medical concerns as a result of the incident.

9. Other behavioral health client services - Indicate other services the client is receiving.
    a. Client may be receiving additional behavioral health services outside of the program.
    b. For example: outpatient, FSP/ACT, WRAP, MAT, day treatment, WM, residential, recovery services, OTP

10. Medical/Physical Health of the Client – Provide details about the client's medical/physical health
    a. Current prescribed medications
    b. Name of prescribing physician
    c. Physical/medical conditions

11. Tarasoff - Select appropriate response to Tarasoff question.
    a. Confirm whether or not a Tarasoff report of findings indicated.
    b. NOTE: *Program is not required to submit a report of findings for Tarasoff reports unless it is relevant to an identified systemic issue in program operations or to client's treatment.*

12. Program Manager Information – To be completed by the program manager after the SIR is reviewed.
    a. Program Manager or designee shall attest to reading and agreeing with the information included in the SIR by checking the box and entering their name and date this step was completed.