

Instructions and Definitions for CMHC-Other Agency Related Critical Incident Reporting

Description	Entry Actions <i>Note: Items with a red asterisk (*) are required fields</i>
Navigate to the Portal	Log into the DMHA Provider Portal: https://dmhaproviderportal.in.gov/DMHA/s/
Critical Incident Report	Select the Critical Incident Reporting tab at the top of the page, then select Report Critical Incident .
Choose the Facility	Choose the Facility where the incident occurred. Select NEXT
Critical Incident Reporting Choice	Select "CMHC-Other Agency Related" from the drop-down list as the type of Critical Incident Report type . Select NEXT
Incident Type	Select Incident Type From List
	* Public Health Concern
	*High profile community event involving agency
	* Breach of Confidentiality
	* Event causing site closure
	* Event causing the relocation of consumers
	* Other
	If other is selected, a box will pop up asking for a description of the incident. When complete, select NEXT
When did the Incident occur?	Enter the Date and Time that the critical incident occurred and provide a Description of the Event .
	Late Submission of CIR: If reporting this incident outside of the required reporting window, select the checkbox. Upon checking, a new text box will appear asking to <i>Please Provide an Explanation of the Late Report Submission</i> .
	When complete, select NEXT
Will an Agency Internal Review Be Conducted? Please Provide Incident Resolution/Plan of Action	From the drop-down list, select Yes or No if the agency will conduct an internal review of the incident.
	In the text field, provide steps that have been, or will be taken to resolve this incident as well as mitigate similar incidents from occurring in the future.
	When complete, select NEXT
Endangered Notification Sent to Adult Protective Services (APS) Endangered Notification Sent to Child Protective Services (CPS) Endangered Notification Sent to Law Enforcement	You will be asked if any Endangered Notification to APS, CPS, or local Law Enforcement agencies were made.
	If No is selected for all notifications, Select NEXT
	If Yes is selected for any notification, the following page will ask you to enter required notification details.
	* The Date Notification Sent
	* APS, CPS, Law Enforcement Report Number (If a report number was not provided, type "not provided" and brief explanation as to why one was not provided, such as entered online, to be provided upon receipt of report, etc. When complete, select NEXT

Instructions and Definitions for CMHC-Other Agency Related Critical Incident Reporting

<i>Provide Information on the Person Completing This Form</i>	Enter contact information for the person completing the form. Provide the First, Middle (if applicable), and Last name along with the date the form was completed/signed. When complete, select NEXT.
<i>Provide Information on the Agency Contact</i>	Enter the agency contact First, Middle (if applicable) and Last Name, contact phone number, and contact email address of the individual to whom DMHA should contact regarding the incident report. When complete, select NEXT
<i>Critical Incident Report Details</i>	<div>A Critical Incident Report Details summary page appears to review for data errors. The last option on this page offers the opportunity to Return to previous section or submit?</div> <div>Open the drop-down arrow under the question "Return to previous section or submit?" If you want to review or edit a section, select the report area to where you wish to return. You will be given the opportunity to edit information from that portion. You will also be prompted to re-enter information that may not have been in error as you proceed through the end of the report.</div> <div>Review or Add Incident Details</div> <div>Review or Add Individuals</div> <div>Review Endangered Notifications Details</div> <div>Submit Incident Report</div> <div>If you do not wish to return to a prior area, or when review and editing is complete, select Submit Incident Report.</div>
<i>Report Submitted</i>	You will know the CIR has been finalized and submitted when the screen reads " Your Critical Incident Report has been submitted and will be reviewed by DMHA. Please click Home to continue. " You are safe to leave the application.

General Terms & Definitions

CMHC-Other Agency Related means an event that happens globally to the Community Mental Health Center and impacts consumers on a global level.

Consumer/Patient means an individual who is receiving assessment or mental health services from the block grant provider.

Facility means a block grant provider that has specific certifications through the Division of Mental Health and Addiction.

The facility will submit a CIR within ten (10) working days for the following unless otherwise specified.

Public Health Concern

These are health concerns that impact the health of entire populations. These may include but are not limited to infectious disease outbreaks at your agency.

High profile community event involving agency

This relates to events that occur about or at your agency that may result in media coverage of the event.

Breach of Confidentiality

Instructions and Definitions for CMHC-Other Agency Related Critical Incident Reporting

Occurs when sensitive information is disclosed without authorization, which can significantly impact a consumer in various ways. It refers to the unauthorized acquisition, access, use, or disclosure of confidential information, compromising its security and integrity.

Event causing site closure

This is related to any event that results in the closure of a facility at your agency for several hours. This may include but is not limited to a water leak at a facility.

Event causing the relocation of consumers

This is related to any event that results in the relocation of consumers to another facility or service site that is different from their current facility or services site. This may include but is not limited to a fire that results in a facility or site being closed.

Other

This is for all other agency events that the agency would like to notice DMHA of, but are not required above.