

POLICY AND PROCEDURE

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Critical Incident Reporting and Staff Debriefing Procedure

Partial Hospitalization Program (PHP)

Effective Date: 08/15/2025

Approved By: Director of Medical and Clinical Services

Review Schedule: Annually or as Needed

Applies To: All Programs — Outpatient MH/SUD, IOP, PHP, and Integrated Primary Care/Behavioral Health

Purpose

To establish procedures for reporting, reviewing, and responding to critical incidents occurring within the Partial Hospitalization Program (PHP). This procedure ensures that incidents affecting the safety of individuals served, staff, or visitors are documented, reviewed, and addressed in a manner that promotes safety, learning, and quality improvement.

Policy

The program requires prompt reporting and review of all critical incidents. Critical incidents are events that result in or have the potential to result in harm, significant disruption of services, or safety concerns within the program environment.

Following a critical incident, staff participate in structured debriefing to review the event, identify contributing factors, and support staff well-being.

Definition of Critical Incident

A critical incident may include, but is not limited to:

- Suicide attempt or serious self-harm
- Physical assault or violent behavior
- Medical emergency requiring EMS response
- Overdose or severe substance intoxication
- Elopement from the program environment
- Significant property damage
- Events requiring emergency services intervention

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- Any incident that poses serious risk to safety

Immediate Response

When a critical incident occurs, staff must:

1. Ensure the immediate safety of individuals served, staff, and visitors.
2. Provide appropriate clinical or medical assistance.
3. Contact emergency services when necessary.
4. Notify program leadership or supervisory staff immediately.
5. Follow crisis response procedures as appropriate.

Incident Reporting Procedure

Following the immediate response, staff must complete an incident report according to organizational policy. The report should include:

- Date, time, and location of the incident
- Individuals involved
- Description of the event
- Immediate actions taken
- Notifications made (leadership, EMS, etc.)

Leadership Review

Program leadership reviews incident reports to determine:

- Severity of the incident
- Whether additional investigation is required
- Whether corrective action or policy revision is needed
- Whether a root cause analysis should be conducted

Staff Debriefing

Following a critical incident, the program conducts a staff debriefing when appropriate. Debriefing may include:

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- Review of the sequence of events
- Discussion of staff response and interventions
- Identification of factors contributing to the incident
- Opportunities for improving safety procedures
- Emotional support for staff involved in the incident

Corrective Actions

When needed, leadership may implement corrective actions including:

- Policy or procedure revisions
- Additional staff training
- Environmental safety changes
- Process improvements

Documentation Requirements

Documentation related to critical incidents must be maintained and may include:

- Incident reports
- Debriefing summaries
- Corrective action plans
- Follow-up monitoring activities

Quality Improvement Integration

Critical incident data is reviewed periodically through quality improvement and risk management processes to identify trends, improve safety practices, and strengthen program operations.

Confidentiality

Information related to critical incidents and debriefings is handled confidentially and shared only with individuals who have a legitimate need to know for safety or administrative purposes.