

Frequently Asked Questions & Reminders

REMINDERS

- CHRIS will close out after 15 minutes of non use. **So SAVE your work!**
- When the incident or allegation is saved, an email is automatically sent to the DBHDS Advocate or the Licensing Specialist. This email serves as the providers required notification to human rights or licensing about the incident or allegation.
- Abuse and complaint cases are closed by the advocate.
- Advocate refers to the DBHDS advocate
- Deaths and Serious Injuries are closed by the Licensing Specialist.
- Providers will only see information about the individuals they serve within their programs. No provider has access to another providers data or information even if an individual is serve d by both providers.

QUESTIONS

1. Is it possible for two providers to enter the same complaint/abuse allegation or death/critical incident/injury?
 - Yes, this is possible and happens from time to time. Two providers who serve the same consumer may report the same incident in CHRIS. For example, an individual receives Day Support Services and Group Home Services. One day he is found to have bruises on his body by the Day Support staff. He cannot tell the Day Support staff what happened The Day Support program would report this in CHRIS and investigate. The Group Home where the individual resides should also report this in CHRIS and conduct an investigation as well. The outcome of both investigation would be in CHRIS.
2. Are medication errors reported as both a serious injury and an allegation of neglect?
 - The following type of medication error is to be reported as both an allegation of neglect and as a serious injury:
 - Any medication error that requires further medical evaluation/care by a medical practitioner listed in the serious injury Guidance document
 - The following type of medication error is to be reported as neglect:
 - Any medication error involving:
 - administration of the wrong dose
 - administration of the wrong medication

- administration to the wrong person
- Discovery of a medication error that occurred where:
- multiple doses of medication were not administered
 - discontinued medications were still being administered

3. Do we have to enter the name of the person alleged to have abused or neglected the individual?

The name is a required field at this point. The system will take the word "unknown" in the last name box. We do expect the real name to be entered for all "founded" cases of abuse or neglect prior to the case being closed.

4. Why does the system require the birth date of the person alleged to have abused or neglected the individual?

This is done in case there are multiple employees with the same or similar name.

5. When are peer to peer incidents reported?

Any peer to peer incidents that meet the definition in the regulations should be reported in CHRIS as potential neglect.

The definition is:

"Peer-on-peer aggression" means a physical act, verbal threat or demeaning expression by an individual against or to another individual that causes physical or emotional harm to that individual. Examples include hitting, kicking, scratching, and other threatening behavior. Such instances may constitute potential neglect.

6. What happens if an address is not listed in the CHRIS set data and it is a mandatory field?

- Please contact the Office of Licensing (OL) if the address is not listed. If it is not listed, it will be as soon as Office of Licensing Information System (OLIS) is updated with the information.

7. Clarification on the meaning of the phrase from serious injury definition of "involved in services?"

- The client is enrolled and currently receiving services from the provider.

8. Does this mean while provider staff is present delivering face-to-face services? For example, if the client is only in a case management service and an injury occurs while at their own private residence, is this a required report?

- Yes, if the client received medical attention as described in the definition of serious injury.

9. Will providers be able to generate reports on their complaint stats from this site? Can providers print their completed reports? Can providers run these reports or just DBHDS employees?
- Yes providers can print reports.
10. A seizure may result in a serious injury, but may not as not all seizures would fall into this category. What if a seizure event did not lead to an injury as indicated in the serious injury definition? Will we need to report every seizure of any kind?
- Not all seizures would require reporting. Reporting is required only if the individual gets medical attention for that particular seizure as defined in the serious injury guidance document.
11. If a seizure lasts more than 5 minutes and 911 is called and the person is taken to the hospital, it sounds like this now needs to be reported. In the past this wasn't reported as there was no injury.
- Reporting is required only if the individual gets medical attention for that particular seizure as defined in the serious injury guidance document.
12. What about medical attention provided by an RN? Does that qualify for reportable injury?
- Reporting is required only if the individual gets medical attention from the medical professionals outlined in the serious injury guidance document.
13. What if the person has a seizure disorder and staff notice that seizures have been increasing in the past month and a follow-up appointment is made. Would that be reported?
- Yes, they may have had a seizure on a Monday and the appointment was a couple days later and the appointment was directly correlated to the concern of increasing episodes of seizures.
14. If a client does not receive an over the counter medication (OTC), should this be reported as a medication error?
- If the OTC has a doctor's order associated with it, then that is classified as a medication error.
15. We are a CSB with many contract providers. Will we have access to our contract provider reports - and will we be able to run a summary report of all of our contract providers at one time (not individually by provider)
- No
16. Does the reporting CSB get notified when the STATE advocate closes the case?
- No

