FAQ & TIP SHEET

COUNTY OF SAN DIEGO
BEHAVIORAL HEALTH SERVICES

Report of Findings (ROF)

- **What are report of findings (ROF) and why do I need to submit them?**
  - All critical incidents shall be reviewed and investigated by the program. The ROF is the report of the review and investigation with relevant findings, interventions, and recommendations.
  - Refer to the OPOH/SUDPOH for additional information.

- **What is the process for submitting the ROF? What if I need an extension?**
  - Complete ROF and submit to QA = within 30 days of knowledge of the incident.
  - Programs are responsible for submitting the ROF within the required timelines and requesting an extension as needed.
  - For critical incidents pending a CME report, programs have the option of submitting the ROF by the 30-day timeline without the CME report or requesting an extension for the ROF if it is preferred to wait for the CME report.

- **What is the CME report? Is the CME report required before submitting the ROF?**
  - CME report is the County Medical Examiner's Report. It is required for serious incidents involving death of a Member because it provides the final cause of death determination.
  - CME report is not required before submitting the ROF for incidents involving the death of a Member. ROF's can be submitted while the CME report is pending, or programs can request an extension to submit the ROF if they prefer to have the CME report first.

- **When is the RCA required?**
  - RCA is required for any death by suicide, alleged homicide committed by Member, or as requested by County QA.
  - May be completed for any other serious incident event.
  - If RCA is completed, SIROF section 5: Serious Incident of Findings and Recommendations is not required.

- **Where can I find the CIR and ROF forms?**
  - The forms are located the SMHS DMC-ODS Health Plans shared Optum page with FAQ/Tip Sheets under the "Incident Reporting" tab.

- **How do I complete the SIROF Form?**
  - Must 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. Program Type - only select one; see the prompt that states "Click to view/select options" to initiate the drop-down menu
   b. Name of Agency/Legal Entity and Program Name
   c. Program Manager info (Name, email, phone)
   d. Name of staff completing ROF and date completed
   e. COR name

f. Contract #, if known or available

2. Incident Information – Provide details about the incident including date, ROF submission details and date, RCA details and date.
    a. Date of incident
    b. Was the ROF was submitted within 30 days of reported incident – yes/no
    c. If no, explain why it was not sent to QA within 30 days.
    d. If RCA is required and date completed if required.

3. Member Information – Provide details about the Member involved in the incident, unless Non-BHS Plan Member or OOC Member, this section is not required.
    a. Member Name
    b. Member's EHR number, if applicable
    c. Custody status in the last 30 days

4. Overdose Information – Please provide details for serious incidents related to an overdose.
    a. If serious incident not related to an overdose, select N/A.
    b. Substance involved.
    c. If opioid was involved, was the Member receiving MAT services and where the Member was referred to or receiving MAT services. If polysubstance was identified and an opioid was involved, complete all of the questions in this section.
    d. If Member was not referred to MAT or declined a referral, provide details to explain the reason why the Member was not referred or is not currently receiving MAT.
    e. If Naloxone/Narcan administered and by whom.
    f. If fentanyl specific testing included in all Member urine screens; include details such as date and results of most recent fentanyl specific test.
    g. If Member given health education about Naloxone/Narcan for overdose prevention as part of treatment prior to the incident, such as during intake.
    h. If a Naloxone/Narcan kit was prescribed or given to Member for overdose prevention prior to the incident (not including staff administration of naloxone).

5. Critical Incident of Summary Findings and Recommendations/Planned Improvements – Describe the results of the investigation and recommendations as a result of the incident. Do not copy/paste the CIR info. NOTE: If an RCA was complete, this section is not required; select N/A instead.
    a. Results of investigation
        i. Briefly describe the incident, including information from the Serious Incident Report and any additional information gathered during the investigation.
        ii. Document your investigation into the events leading up to the incident (i.e., review of chart and any relevant Policy and Procedures, interviews of staff and/or Member, etc.)
        iii. Document your analysis of the investigation (i.e., identify any precipitating factors, follow up services, response to treatment).
    b. Recommendations or planned improvements
        i. Changes in Policies and Procedures-Identify and new policies and procedures which will be implemented in order to reduce risk to the Members and the program.
        ii. Quality improvement practices-Identify ongoing strategies which the program will implement in order measure the effectiveness of the policies and procedures.

iii. Clinical supervision/oversight
iv. Trainings, etc.

6. Root Cause Analysis – RCA is required for any serious incident that results in death by suicide, alleged homicide committed by Member, or as requested by QA. If required to complete this section, provide details for root case analysis after an RCA has been completed. NOTE: If an RCA has not been complete or is not required, select N/A.
    a. If a root cause was identified – yes or no
    b. RCA Summary findings – Describe the incident, the results of the investigation and analysis of the incident. Describe the root cause if one was identified.
    c. RCA Summary of action items - Create a plan of action items the program will implement which will reduce the risk to the Members and program. Identify the measures that will be used to determine the effectiveness of the plan.

7. Program Manager Attestation - Staff completing the form is required to attest to one of the options:
    a. I am the Program Manager and am attesting that the information provided is accurate.
    b. I am submitting on behalf of the Program Manager and am attesting that the information provided is accurate and has been reviewed with the Program Manager