



## State of New Jersey

DEPARTMENT OF HUMAN SERVICES  
OFFICE OF PROGRAM INTEGRITY AND ACCOUNTABILITY  
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TRENTON, NJ 08625-0700

CHRIS CHRISTIE  
GOVERNOR

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COMMISSIONER

March 3, 2014

Dear Executive Director/CEO:

This letter is to advise you of an important change in unusual incident reporting policies.

Effective immediately, the Department of Human Services (DHS), Critical Incident Management Unit (CIMU) has discontinued the policy requiring the routine submission of a **follow-up report** related to incidents involving the **unplanned hospital admission** (Code = MD 520) of a consumer receiving community mental health and/or substance use disorder services. This policy change applies to unplanned hospital admission only.

Agencies continue to be required to submit an **initial** unusual incident report involving the unplanned hospital admission (for medical and/or mental health reasons) of a consumer served based on the following guidelines:

- For unplanned hospital admission incidents (for medical and/or mental health reasons) involving consumers served in **DHS licensed A+ residential settings- the initial incident is always reportable to DHS;**
- For unplanned hospital admission incidents (for medical health reasons only) the **incident is reportable to DHS only if the incident occurs on the agency site or in the presence of agency staff** for consumers served in other DHS licensed settings, including:
  - Residential - A, B & C
  - Supportive Housing
  - Residential Intensive Support Team (RIST)
  - Partial Care
  - Outpatient
  - Intensive Outpatient Treatment Support Services(IOTSS)
  - Early Intervention Support Services (EISS)
  - Program of Assertive Community Treatment (PACT)
- For all settings identified above, other than A+ residential settings, an initial report involving an unplanned psychiatric hospital admission **is reportable only when precipitated by another otherwise reportable event, such as a suicide attempt.**

Please note that agencies may be asked to provide additional follow-up information based on individual circumstances/situations as needed. In situations where additional information is reported requiring an additional code, i.e. allegation of physical abuse with injury requiring the consumer to be hospitalized, an investigation and/or follow-up report will be required for the entire incident.

Implementation of this updated policy will align with the process currently in place for other DHS divisions.

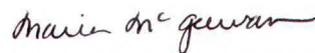
A copy of this letter, and all policies/tools related to the strengthened system for mental health community agency reporting are available on the DHS/DMHAS website pages using the following link:

<http://www.state.nj.us/humanservices/news/hottopics/approved/mentalhealthinfo.html>

For questions or concerns, please contact Miloni Bhatt at (609) 292-5735 or via e-mail at [Miloni.Bhatt@dhs.state.nj.us](mailto:Miloni.Bhatt@dhs.state.nj.us) or Mirka Kuba at (609) 292-5501 or via e-mail [Mirka.Kuba@dhs.state.nj.us](mailto:Mirka.Kuba@dhs.state.nj.us) .

Thank you for your continued partnership and ongoing efforts regarding unusual incident reporting.

Sincerely,



Maria McGowan, Administrator  
Critical Incident Management and  
Central Fingerprint Units

c. Roger Borichewski, DMHAS