

For Sentinel Event involving regional Medicaid Client, **please Notify immediately:**  
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**PATHWAYS CA**  
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**Sentinel Event Definitions**

*for Substance Abuse **Residential** Treatment Programs*

<b>Incident Category*</b>
<u>Death of a recipient</u> which is not by natural cause or does <b>not</b> occur as a natural outcome to a chronic condition (e.g. terminal illness) or old age.
<u>Accident</u> resulting in injuries that result in death or loss of limb or function to recipient which required visits to ER, medi-centers, urgent care clinics/centers and/or admission to a hospital
<u>Serious physical illness</u> requiring admission to hospital does <b>not</b> include planned surgeries or admissions directly related to the natural course of the person's chronic illness, or underlying condition (e.g. a known terminal illness)
<u>Serious challenging behaviors</u> are ones not already addressed in a Tx Plan and include significant (in excess of \$100) property damage, attempts at self-inflicted harm or harm to others, or unauthorized leave from residential treatment resulting in death or loss of limb or function to the individual or risk thereof.
<u>Arrest of recipient</u>
<u>Conviction of recipient</u>
<u>Medication error</u> means a) wrong medication; b) wrong dosage; c) double dosage or d) missed dosage which resulted in death or loss of limb or function or the risk thereof. It does <b>not</b> include an instance where a client has refused medication.

**Important:** Any Incident falling into the Categories listed above should be thoroughly reviewed to determine whether it meets the criteria for a Sentinel Event, defined below, and if it is related to practice of care.

**Sentinel Event:** is an “**unexpected occurrence involving death or serious physical or psychological injury**, or the risk thereof. Serious injury specifically includes loss of limb or function. The phrase, ‘or risk thereof’ includes any process variation for which a recurrence would carry a significant chance of a serious adverse outcome.” (JCAHO, 1998)

**Note:** This form is available in electronic format. Request your copy by emailing: [jmccombie@up-pathways.org](mailto:jmccombie@up-pathways.org)  
Questions? Call Jan McCombie, SA Data Coordinator, 906-225-4435      Form Revised 7-2011