

PCMA Behavioral Crisis Incident Risk Assessment and Root Cause Analysis Checklist

Version 0311



The PCMA BCIRA tool is for use by human services organizations wishing to evaluate their risk of undesired outcomes from behavioral crisis events, so as to prevent them from occurring. It is also useful for conducting a proper root-cause analysis after an undesired outcome has occurred. This tool can be used regardless of what crisis management system is used in the setting or if there is no formal system in place.

For updated versions of this tool and for more information on providing safe crisis prevention and intervention and on reducing risk and injuries, please visit the PCMA website at www.PCMA.com.

Instructions: This tool is intended as a guide for more in-depth analysis beyond the simple completion and scoring of the form by one individual. It is recommended that the person using the tool gather information from a variety of sources including any direct observation possible as well as written and verbal reports from direct contact staff, particularly those involved in crisis events, and other team members. Scores on this tool are not currently correlated with specific levels of risk, but are intended to focus attention on areas in need of more investigation or attention by the organization. It should be noted that potential risks can never be entirely eliminated or perfectly quantified and should always be considered along with potential benefits.

Name of Organization: _____

Assessment/Analysis Date(s): _____ Person Completing Form: _____

Information Sources: _____

If using this form for analysis of a past event include the following or attach documentation of the incident being considered:

Date of Incident: _____ N/A _____

Persons Involved and their Roles (consumer, staff member, etc...): _____

_____ N/A _____

Short Description of the Incident and Outcomes: _____

_____ N/A _____

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All of the following questions pertain either to individuals in the setting who are subject to physical crisis management procedures or (if conducting an analysis of a past event), the individual in question. Please check the most appropriate box for each. For each true response, the person completing the form should seek to answer "why".

1. Physiological Factors

- a. Individuals are not given thorough physicals on or before admission with specific attention given to cardiac and pulmonary vulnerabilities. Or/ The individual in question was not given this sort of physical examination on or before admission.

True	False	N/A

Note: _____

- b. Individuals have a known heart or lung condition. Or/ The individual in question had such a condition.

True	False	N/A

Note: _____

- c. Individuals may have undiagnosed heart or lung conditions. Or/ The individual in question was later found to have had an undiagnosed heart or lung condition.

True	False	N/A

Note: _____

- d. Individuals may have medical conditions that can cause pain or discomfort or a greater than normal risk of injury during normal crisis management procedures. Or/ The individual in question had such a condition.

True	False	N/A

Note: _____

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2. Medication Factors

- a. Individuals are taking prescribed medication(s) known to cause prolonged QT intervals of the heart. Or/ The individual in question was taking one or more of these medications. **Risk increases with number of medications taken in combination – see attached list.**

True	False	N/A

Note: _____

- b. Individuals are taking prescribed medication(s) known to depress the Central Nervous System. Or/ The individual in question was taking these medications – **see attached list.**

True	False	N/A

Note: _____

- c. Individuals may receive one or more doses of PRN (emergency) psychoactive medication just before or during a crisis event. Or/ The individual in question received one or more doses of such medication before or during the event in question.

True	False	N/A

Note: _____

- d. Individuals are prescribed medication(s) with potential side effects that can contribute to aggressive behavior (increased agitation, increased confusion, physical discomfort, etc...). Or/ The individual in question was taking one or more of these medications.

True	False	N/A

Note: _____

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3. Programming and Prevention Factors

- a. There is no (or insufficient) setting-wide, on-going behavioral programming that focuses on teaching behaviors that help to prevent crisis (adaptive behaviors/communication skills/replacement behaviors) and provides opportunities, prompting and reinforcement for using these skills. Or/ The individual in question did not receive such programming.

True	False	N/A

Note: _____

- b. There is no activity schedule in place, there are large gaps in scheduled activities, the students/consumers do not seem interested in scheduled activities, and/or there are few available options for stimulating activities in the setting. Or/ The individual in question had few stimulating scheduled activities or experienced gaps in activities.

True	False	N/A

Note: _____

- c. Individuals who are subject to one or more crisis intervention procedures are not immediately referred for complete behavioral assessment and the development of individualized behavior plans conducted by qualified individuals. Or/ The individual in question had not received an individual assessment and behavior plan.

True	False	N/A

Note: _____

4. Staff Training Factors

- a. Staff members who are likely to be involved in crisis events (or were involved in the event in question) are not formally trained in crisis prevention and intervention methods.

True	False	N/A

Note: _____

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- b. Crisis prevention and intervention training is not performance-based and/or contains criteria for passing that are subjective, non-standardized or determined by individual instructors.

True	False	N/A

Note: _____

- c. Training standards are low (too brief, no specified minimum duration (or too short), no specified maximum number of participants (or too many) preventing participants from achieving skill fluency.

True	False	N/A

Note: _____

- d. Training does not include minimum repetitions of correctly performed skill shown to result in fluency.

True	False	N/A

Note: _____

- e. Staff members in the setting (or those who were involved in the event in question) have a poor understanding of use and/or release criteria and are inconsistent in applying them to actual crisis situations.

True	False	N/A

Note: _____

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5. Staffing and Supervision Related Factors

- a. Staff members in the setting (or those who were involved in the incident in question) are not certified or competency trained to implement procedures.

True	False	N/A

Note: _____

- b. Staff members in the setting often interact with consumers/students in ways that might be characterized as coercive or that involve "power struggles".

True	False	N/A

Note: _____

- c. Staff certifications have lapsed or more than 18 months have passed before refresher training. Or/ This is true of staff members involved in the event in question.

True	False	N/A

Note: _____

- d. Staff members in the setting (or those involved in the event in question) had prior training in military, martial arts or police methods without more recent training in methods more suited to their current population.

True	False	N/A

Note: _____

- e. Staff members are not routinely observed performing crisis procedures by supervisors or otherwise evaluated for on-site, interim refresher training. Or/ On-site refresher training by qualified supervisory or training staff on an as-needed basis is not offered or available.

True	False	N/A

Note: _____

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- f. There are factors that discourage staff members from fully and accurately reporting events and may encourage invention or modification of procedures, such as: crisis definitions with “loopholes” that allow certain events to go unreported, “hands-off” policies without sufficient alternatives, and undesired consequences to staff members for reporting and/or intervening. Or/ Such factors were involved in the incident in question.

True	False	N/A

Note: _____

6. Consumer/Student Related Factors

- a. Consumers/students engaging in crisis behavior may be particularly large and/or strong in comparison with staff members responsible for applying crisis management procedures. Or/ This is true of the event in question.

True	False	N/A

Note: _____

- b. Consumers/students engaging in crisis behavior have a significant history of very aggressive behavior resulting in actual injury to self or others. Or/ This is true of the consumer/student in question.

True	False	N/A

Note: _____

- c. There is some indication that crisis procedures being used may function as a strong reinforcer for the crisis behavior of consumers/students in the setting. Or/ This is true of the consumer/student in question.

True	False	N/A

Note: _____

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7. Procedural Design Factors:

- a. Procedures used in the setting (or during the event in question) include potentially dangerous elements such as pressure on the torso, neck or head, or pressure on, or unnatural movement against, the joints.

True	False	N/A

Note: _____

- b. Procedures used in the setting (or during the event in question) are not effective enough to stop the movement of a very strong individual who is likely to injure someone or himself/herself.

True	False	N/A

Note: _____

- c. Procedures used in the setting (or during the event in question) do not contain safeguards against torso compression, blunt force and blocked airway.

True	False	N/A

Note: _____

- d. Procedures used in the setting (or during the event in question) do not have a history of safety over many applications across settings, over long periods of time (years).

True	False	N/A

Note: _____

- e. Procedures used in the setting (or during the event in question) have a duration based release criteria (as opposed to behaviorally based) measured in increments greater than seconds. In other words, the system allows for more than a safe number of seconds of no movement without release.

True	False	N/A

Note: _____

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- f. Procedures used in the setting (or during the event in question) are not designed specifically for the size of the individuals they are being used with.

True	False	N/A

Note: _____

- g. Procedures used in the setting (or during the event in question) include awkward, uncomfortable or painful positions or movements that increase aggression and struggling.

True	False	N/A

Note: _____

8. Procedural Implementation Errors

- a. Procedures used in the setting (or those used in the event in question) are sometimes modified or invented intentionally.

True	False	N/A

Note: _____

- b. Procedures used in the setting (or those used in the event in question) are sometimes modified inadvertently during the incident.

True	False	N/A

Note: _____

- c. Staff members do not (or did not during the event in question) follow usage criteria or release criteria.

True	False	N/A

Note: _____

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- d. More, or fewer, than the specified number of staff members sometimes participate in a given procedure (or there is no number of staff specified). Or/ This is the case for the event in question.

True	False	N/A

Note: _____

9. **Environmental Factors**

- a. Procedures in the setting are sometimes performed against a surface that is hard, unyielding or that has something potentially harmful on it or protruding from it. Or/ This is true of a procedure involved in the event in question.

True	False	N/A

Note: _____

- b. The setting is particularly loud or chaotic and/or many students or consumers regularly engage in aggressive behavior.

True	False	N/A

Note: _____

- c. Whether by design or by accident, a surface or object with the potential to restrict the individual's airway may be present during a crisis management procedure (for example a towel in the individual's mouth or a cover over the individual's face or head, loose bedding materials under the individual). Or/ This is true of a procedure involved in the event in question.

True	False	N/A

Note: _____

- d. Individuals are sometimes left alone and unsupervised when they are actively aggressive or engaging in dangerous behavior. Or/This is true of the event in question.

True	False	N/A

Note: _____

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Results Summary

Factor Type	From left to right, darken the number of spaces = to the number of "true's" marked in the section.	%
Physiological Status	O O O O	___ /4 or ___ %
Medications	O O O O	___ /4 or ___ %
Programming and Prevention	O O O	___ /3 or ___ %
Staff Training	O O O O O	___ /5 or ___ %
Staffing and Supervision	O O O O O O	___ /6 or ___ %
Consumer Related	O O O	___ /3 or ___ %
Procedural Design	O O O O O O O	___ /7 or ___ %
Procedural Implementation	O O O O	___ /4 or ___ %
Environment	O O O O	___ /4 or ___ %

Normative data are not yet available for this tool, however, in general, the higher the ratio of answers marked "true" (the greater percentage), the more risk your organization is likely to face from this area of concern.

More information on specific ways to reduce risk or develop corrective action plans for any/all of these areas is located at www.pcma.com/root-cause-assessment.htm

Partial List of Medications Known to Cause Prolonged QT Intervals (Increased Risk of Cardiac Events), Especially When Taken in Combination:

The QT interval is the duration from the onset of depolarization to the completion of repolarization of the heart. If the cycle is prolonged, the heart becomes very vulnerable and unstable. QT intervals can be caused by disease processes and up to 40 antipsychotic and antidepressant medications, especially when taken in combination.

Elavil	Celexa	Haldol
Anafranil	Prozac	Thorazine
Norfranil	Sarafem	Clozaril
Pamelor	Zoloft	Serentil
Vivactil	Effexor	Risperdol
Surmontil	Paxil	Seroquel
Pertofran		Geodon
Sinequan		Mellaril

Partial List of Medications Known to Cause Depressed Nervous System Function

Central nervous system (CNS) depression is the physiological depression of the central nervous system that can result in decreased rate of breathing, decreased heart rate, and loss of consciousness possibly leading to coma or death. CNS depression most often results from the use of depressant drugs, anti-anxiety drugs and anticonvulsants.

Barbituates: Seconal, Phenobarbital, etc...
Benzodiazepines: Valium, Ativan, Flurazepam, Halcion, Lorazepam, Librium, Xanax, Klonopin, etc...

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For additional copies of this assessment tool, or for more information on safe crisis prevention and management, crisis risk assessment, crisis event root cause analysis and related topics, please feel free to contact the Professional Crisis Management Association (PCMA). Thank you.

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