# **Incident Report Quick Fact Sheet**

#### When do I need to complete an IR?

An IR Must be completed for all unusual events. "When in doubt, fill it out."

This may include but is not limited to incidents, accidents, illnesses, absences, and death:

- Death
  ●Jail
  ◆Police
  ◆EMS
  ◆Accident/Injury
  ◆Illness
  ◆Elopement
  ◆Hospitalization
  ◆Seizure
- ◆Serious Hostility ◆Self Injury
  ◆Harm to others
  ◆property destruction
  ◆Unusual behavior episode
- ●Significant Verbal aggression ●Documentation of bruises, burns, cuts, bed sores, etc. ●Absence/didn't notify
- Med Error (refused/not given/not available/dropped/etc)
  PRN Med for behavior/anxiety/relaxation

Who fills out the IR? - The observer and is also reported to the supervisor (not completed by supervisor).

#### Do I really have to write it before the end of my shift?

**YES!** IR's MUST be **completed and submitted** to the Office of Recipient Rights within **24hours**. IR's not only protect recipients, but also can protect staff. Remember Investigations for Abuse/Neglect must be started immediately; your timeliness directly impacts Rights Investigations.

# What do I write/ How do I fill it out?

Just the facts: Who, What, where, when, how. Needs to be clear, complete, concise and timely.

Other Persons Involved: (The relevant "who" of the story)

- •The name of the person(s) who was involved in the accident or incident.
  - •Staff = First/Last Name •Other residents = initials, case #, Resident A, but **no** name!
  - •2+ residents participated in incident each need an IR! Ex: A pushed B= IR (behavior) for A and IR (Safety) for B.

Facts of the Incident: The When and Where of the story (date, hour, place)

● Double check dates! ● AM/PM matters ● Name the room/location where incident occurred

**Explain what happened**: (Think of an IR as a story, it should have a beginning, middle, and end)

- •Beginning: what caused the incident. (Okay to say unknown)
- •Middle: What happened.
  - Describe the behavior
    Describe injury (size, shape, color)
    How did it effect them?

#### Action Taken by Staff/Tx given

- •End: Statement regarding the extent of the injuries, the treatment ordered, and the disposition of the person who was involved.
  - ◆What did you do ◆did it work? ◆Did you notify anyone? ◆Is any follow up needed?

# Do I have to notify anyone else?

Incidents of suspected abuse or neglect must be verbally reported IMMEDIATELY to your supervisor, LARA, APS Central Intake and Recipient Rights. Telling a supervisor or other staff, does **not** fulfill legal reporting requirement.

Remember failing to report suspected abuse or neglect is neglect!

#### If a recipient's rights are violated can I just do an IR?

**No,** an IR does not take the place of a Recipient Rights Complaint. You may in addition, assist a recipient in completing a complaint or make a complaint on their behalf.

What if I made a mistake? Place a single line through and initial. Do not scribble out. No white out. Ex:  $\frac{4}{1/20}$  HH  $\frac{4}{2}$ 00 BCCMHA ORR  $\frac{3}{3}$ 0/20

### Corrective Measures Taken to Remedy and/or Prevent Recurrence - Completed by Supervisor

- •The corrective measures that were taken to prevent the accident or incident from happening again.
  - •Can **NOT** be NONE, Followed Plan, Followed Discharge Instructions or will continue...because this **didn't** work.
  - Must be what you are going to do **DIFFERENTLY** to prevent this from happening again.
    - •Examples: staff to be retrained, increased supervision for staff, follow up appt with PCP, coordination with Case Manager, contacted pharmacy for new med, recipient placed on 15 min checks, etc.

#### **Notifications:**

Name of the individuals who were notified and the dated/time that they were notified.

Incident	LARA	СМН
Death	X	Χ
EMS call/response		Χ
Med error/refusal/not given/not available/dropped		Χ
PRN Med for behavioral purposes - anxiety/relaxation		Χ
Accident w/hospitalization	X	Χ
Accident w/o hospitalization		Χ
Illness w/ hospitalization	X	Х
Illness w/o hospitalization		Χ
Seizure	X	Χ
Hospitalization (Admission or ER)	X	Χ
Self-Injury	X	Χ
Displays of serious hostility	X	Χ
Significant Verbal Aggression		Χ
Harm to others	X	Χ
Serious Hostility	X	Χ
Unusual Behavior (Not on BTP)	X	Χ
Destruction of Property	X	Χ
Arrest/Conviction of resident	X	Χ
Police involvement call/response		Χ
Elopement (w/ or w/o staff following)		Χ
Absent w/o notice	X	Χ

# Before you submit:

- Recheck datesDoes this contain other resident names?
- •Does it make sense? •Does the staff need to attach a statement with more detail or clarifying information?
- •Did completing staff sign? •Was the document completed in 24hours?
- Have notifications been completed? -CMH 24hrs/LARA 48hrs unless immediate verbal is appropriate
- •Did you follow up verbal notification with written notification to designated representative, CMH/RRO, LARA?
- •If supervisor is on vacation, who is designated to review and sign in their absence?

# Retention:

Per LARA, A copy of the written report that is required pursuant to sub rules (1) and (6) of this rule shall be maintained in the home for a period of not less than 2 years. A department form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.