

# INCIDENT REPORTING



## BEGINNING OF THE PRESENTATION

- The Incident Reporting Training will be easier to follow if you have a copy of the Agency Incident Report and the Critical Incident Report in front of you

## HIGH PRIORITY

- ALL INCIDENTS WRITTEN IN THE AGENCY, INCLUDING AGENCY REPORTS AND CRITICAL REPORTS, MUST HAVE ALL AREAS, LINES, QUESTIONS FILLED OUT COMPLETELY.

# INCIDENT REPORTING REPORT FORMS

- Agency Incident Report
- Critical Incident Report
- Injury Final Report
- Medical Hospitalization Final Report
- Corrective Action Plan Report

# TYPES OF INCIDENTS

AMA: Discharge against medical advice.

AWOL: Away without leave

PROPERTY DAMAGE: Incidents involving damage to walls, doors, windows, furniture, computers, and other agency items

# TYPES OF INCIDENTS

VEHICULAR DAMAGE: This includes all state vehicles and vehicles used by employees who use their own vehicles during working hours, regardless of severity of accident.

# TYPES OF INCIDENTS

PROPERTY LOSS: Any property losses or personal losses of clients, staff and visitors while at program sites, in state vehicles and/or in personal vehicles during transportation

# TYPES OF INCIDENTS

INFECTION CONTROL: Illnesses including potential communicable disease, food borne illness, positive tuberculin skin tests,

Reportable diseases required by state law will be reported to the public health department by the program nurses.

# TYPES OF INCIDENTS

According to CARF Seclusion and Restraint is now referred to as non-violent practices

# NON-VIOLENT PRACTICES

Any time a client is placed in a restrictive area due to threatening behavior, a written agency incident report is required.

Any injury requiring medical care during the time a client is in seclusion requires a critical incident report.

# TYPES OF INCIDENTS

Behaviors: Such incidents would be verbal altercations, fighting, using drugs or alcohol, threatening remarks, etc.

# WITNESSES

- Be sure that all the witnesses are written on the agency incident report.
- Be sure to include the CID number after the client's name

# DESCRIPTION OF INCIDENT

- Write only what happened or what was reported to you. This can be written in one to two sentences
- What actions did you take can be written as first step, second step, etc.

# DEBRIEFING

- Only fill out the debriefing area if you had to discuss feelings with a client or clients due to the sensitivity of the incident involved

# SIGNATURE

- In the signature area be sure you have written your name, title and phone number

# CONTACT NUMBERS

- At the very bottom of page two there is a telephone and fax number for the Clients Rights Representative.

Page 2 of agency incident report

# SUMMARY PAGE

- The third page of the agency incident report needs to be filled out if there is an additional staff person involved in the incident or additional information is known

Page 3 of agency incident report

## **SUMMARY PAGE cont'd**

- The person writing the summary should write their name below the summary section
- The Client Rights Representative will sign all agency incident reports once all the information has been collected

Page 3 of agency incident report

# REPORTING OF AGENCY INCIDENTS

- Step 1

It is the responsibility of the staff that is involved in, or informed, or witnesses an incident to do the following:

- a. Report the incident immediately or as soon as possible to the Site Supervisor.

# REPORTING OF AGENCY INCIDENTS

- b. If the incident involves a client, record the event in the Clinical Record.
  - c. Complete an Agency Incident Report and fax it to the Client Rights Representative within 24 hours.
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## **REPORTING OF AGENCY INCIDENTS cont'd**

d. Give the original incident report form to the Site Supervisor who will review it and make sure that all information is on the report and any additional information that may not have been reported or known at the time of the incident.

## REPORTING OF AGENCY INCIDENTS cont'd

- e. If there is more than one staff person helping with an incident then the second person should write a statement on page 3 of the agency incident report if indicated.

# WORKERS COMPENSATION

If the incident involves a CSB staff injury, the Site Supervisor MUST place a call to DOAS 1-877-656-7475 reporting the incident within 24 hours for Workers' Compensation processing.

Send a copy of the agency incident report to Human Resources

# CONFIDENTIALITY

**All agency and critical Incident reports are confidential**

# ORIGINAL INCIDENT REPORT

- All original written incident reports are to be sent to the Client Rights Representative and not kept at sites
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# REPORTING CRITICAL INCIDENTS

- The incident reports that are sent to the DBHDD are sent to the “Incident Management & Investigation section
- The incident report is called a critical incident report commonly known as the “CIR”

# REPORTING CRITICAL INCIDENTS

## cont'd

- Separate forms have been developed by the DBHDD Investigation Section requesting additional information depending on the incident. All critical incident reports are followed - up by the Client's Rights Representative

# REPORTING CRITICAL INCIDENTS

## cont'd

The forms are:

- a. Critical incident Report (CIR)
- b. Final Investigation Report
- c. Medical Hospitalization final report
- d. Client Injury Requiring Treatment beyond First Aid final report
- e. Corrective Action Plan

# REPORTING CRITICAL INCIDENTS

## cont'd

- All incidents involving a written Critical Incident report are found in Category I and Category II of the second page on the incident form
- There are two separate categories on the Critical Incident report.
- Category I incidents are more serious than Category II

# CRITICAL INCIDENT FRONT PAGE

- Be sure all information is filled out before sending the form to the Client Rights Representative. DBHDD will not accept the report if the information is not present

# CRITICAL INCIDENT FRONT PAGE

- If there are two clients or more involved in the incident both or all of the names must be written on the first page and there is a second CIR page for more than two names and addresses

# CRITICAL INCIDENTS SECOND PAGE

## Category I Incidents:

- (Allegation of) Client to Client sexual assault or sexual exploitation,
- (Allegation of) Neglect,
- (Allegation of) Physical abuse,
- (Allegation of) Staff to client sexual assault or sexual exploitation,

## CRITICAL INCIDENTS SECOND PAGE

- Death,
- Medication errors with adverse consequences,
- Seclusion /restraint resulting in injury requiring treatment beyond first aid,
- Suicide attempt that results in medical hospitalization.

## CRITICAL INCIDENTS SECOND PAGE

- Many of the Category I incidents are investigated by DBHDD
- Otherwise the incidents are investigated by the Client Rights Representative.

## CRITICAL INCIDENTS SECOND PAGE

### Category II Incidents:

- (Allegation of) Verbal abuse,
- (Allegation of) Financial exploitation,
- Client injury requiring treatment beyond first aid,
- Client to client assault resulting in injury requiring treatment beyond first aid,

## CRITICAL INCIDENTS SECOND PAGE

- Client to client assault with injury requiring minor first aid,
- Client who is unexpectedly absent from a community residential program or day program,
- Criminal conduct by a client,

## CRITICAL INCIDENTS SECOND PAGE

- Medical hospitalization of a client of a state hospital or community residential program,
- Seclusion /restraint resulting in injury requiring minor first aid,
- Incident occurring at provider's site which required intervention of law enforcement services,

## CRITICAL INCIDENTS SECOND PAGE

- Vehicular accident with injury while client is in a state vehicle or is being transported by community or hospital staff

# CRITICAL INCIDENTS

- All category II critical incidents are investigated by the Client's Rights Representative

# BRIEF DESCRIPTION

What is needed in the brief description:

- What - what happened
- Who - persons involved
- Where - place and location
- When - date and time
- How - what factors caused the incident

# PERSONS OF INTEREST

- This area involves a staff person who is being alleged by a client or family member of some wrong doing

Page 3 of critical incident report

# WITNESS TO INCIDENT

- Any staff, client or other individual who has seen the incident.
- Any staff, client or other individual who has knowledge of the person who has witnessed the incident

# NOTIFICATIONS

- This area is decided by the site supervisor or site director
- Several programs must follow regulations and standards from regulatory organization and it will be the duty of the Supervisor or Director to follow up

# DEATHS

Writing the death section of the CIR:

1. Date of last contact by any staff person
2. Reason for the contact
3. Death was expected or not expected
4. Death an accident?
5. Possible suicide or homicide

**Bottom page 3 of critical incident report**

# DEATH FACTORS

- Only check factors [cancer, hypertension, diabetes, etc.] if it is verified in the client's record.
- Or if the client reports any of the factors - then document on CIR “as reported by client”
- Never check anything that can not be verified in the chart

## DEATH FACTORS cont'd

- Autopsy

Many times it is unknown if there will be an autopsy. If there is going to be an autopsy please ask the family to sent a report of the findings.

## DEATH FACTORS cont'd

- Any medication that the client has been given one week prior to the death and up to the death should be recorded on the CIR.
- If dose, route and frequency is known please fill in that information.

# CRITICAL INCIDENT FORM

- All critical incident reports must be sent to the DBHDD investigation team within 24 hours
- ONLY THE CLIENTS RIGHTS REPRESENTATIVE  
WILL SEND THE REPORTS

## **CRITICAL INCIDENT FORM cont'd**

- Suspicious deaths and death in residential settings must be reported to the Clients Rights Representative within 2 hours of notification

# SIGNATURES

- Prior to sending the Critical Incident Report to DBHDD Investigation Section the Executive Director will sign form

# REMEMBER

- Any incident in the agency will have a written agency incident report

**Please be sure to take the test  
so you get credit for the training**