



ADMINISTRATIVE MANUAL

Policy & Procedure

Title:	Incident Reporting	Number:	AD 60-01
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Distribution:	All Staff & Volunteers	Approval:	Leadership Team

STANDARD

DHW Long Term Care Program Requirements, FINAL February 2019

8.2 Systems and processes are in place to minimize risk to residents, staff, volunteers, visitors and the home.

Windsor Elms Village Guiding Principle:

SAFETY is paramount. We keep each other safe so no one gets hurt. We intervene to prevent injury.

Eden Domain of Well-Being: To enhance a sense of security, it is important for the care partner team to be committed to resident, staff, volunteer and visitor safety and risk management.

RATIONALE

A culture of safety is embraced by the Home.

The benefit of reporting an incident and analyzing the event is to identify cause and effect; determine appropriate follow up and identify strategies to reduce the frequency and severity of any similar incident thereby improving upon safety in the Home.

It is important to accurately and thoroughly compile incidents in order to identify potential risk areas and issues through review of statistical data which is compiled in a database.

POLICY

Windsor Elms Village is committed to minimizing the risk exposure to residents, staff, volunteers and visitors. All staff are accountable for completing an incident report, within 24 hours or as soon as possible, for all incidents or potential/near-misses in order to facilitate appropriate follow up and action.

PROCEDURE

1 Reporting an incident

1.1 It is essential that Incident Report Forms are completed correctly.

1.2 In the case of residents who regularly experience multiple falls (defined as more than 2 falls in a 24 hour period), nurses will use the Multiple Fall Spreadsheet (Appendix A) to record falls that do not result in injury. This sheet would be kept in the Care Plan binder and passed into the Manager at the end of the month.

2 Incident Follow Up, Risk Evaluation & Review

Risk evaluation and follow up is a key component of the risk management process. Risks relating to incidents will be evaluated in order to establish the level of investigation required, and the appropriate action required to eliminate or reduce the risk.

2.1 Resident / Medication Incident Follow Up

Immediate follow up is required for all incidents to ensure safety needs and reduction of risk.

2.1.1 All incidents require completion of an incident report form.

2.1.2 All incidents of a moderate or serious nature (or when deemed necessary) will be reported, within the shift to the Manager/Dept Head and the Incident Report Follow Up Form, on the reverse side of the form, completed.

2.1.2.1 Nurse Team Lead reviews and signs off on the Incident Report and Incident Report Follow Up Form and forwards onto the Manager/Dept. Head.

2.1.2.2 Manager or Dept Head reviews and forwards the Incident Report and Incident Report Follow Up Form to the Director of Care.

2.1.2.3 Director of Care will review and forward the completed Incident Report and Incident Report Follow Up Form to the CEO for review and signature. The CEO will pass in all completed forms to the Administrative Coordinator for tracking and filing.

2.2 Non Resident Incident Investigation (Employee; Volunteer; Visitor)

Immediate follow up is required for all incidents to ensure safety needs and reduction of risk.

2.2.1 All incidents require completion of an incident report form.

2.2.2 All incidents of a moderate or serious nature (or when deemed necessary) will be reported, within the shift to the Manager/Dept Head and Dir. of Environmental Services, and the Incident Report Follow Up Form, on the reverse side of the form, completed.

2.2.2.1 Nurse Team Lead reviews and signs off on the Incident Report and Incident Report Follow Up Form and forwards onto the Manager/Dept. Head.

2.2.2.2 Manager/Dept Head reviews and signs off on the Incident Report and Incident Report Follow Up Form and forwards onto the Dir. of Environmental Services.

2.2.2.3 Dir. of Environmental Services will review and forward the completed Incident Report and Incident Report Follow Up Form to the CEO for review and signature. The CEO will pass in all completed forms to the Administrative Coordinator for tracking and filing.

2.3 Statistical Data Analysis

Accurate information that is collected on the incident reports will ensure the accuracy of statistical data and reporting.

2.3.1 The Director of Care will:

- Receive and review resident incident quarterly reports
- Prepare an analysis to be presented to CPAC and the Leadership Team for discussion, decision making and assigning of accountabilities.
- Present the Medication Incident Quarterly Reports to the Pharmacy & Therapeutics Committee

- 2.3.2** The Director of Environmental Services will:
- Receive and review non-resident quarterly reports
 - Prepare an analysis to be presented to JOHSC and the Leadership Team for discussion, decision making and assigning accountabilities.

2.3.3 Monthly Statistics Included in Report	Quarterly Reports
Apr, May, June	August
July, Aug, Sept	November
Oct, Nov, Dec	February
Jan, Feb, Mar	May

- 2.3.4 The CEO will:**
- Report all moderate and serious incidents (deemed necessary) to the Board of Directors

3. Records Management

- 3.1 Completed incident report forms are confidential; under no circumstances should the incident forms be shared externally or removed from the Windsor Elms without explicit consent from the CEO.
- 3.2 The Manager/Dept Head will submit hard copies to the Administrative Coordinator by the first of each month.
- 3.3 The Administrative Coordinator will input data contained on the completed incidents onto a tracking spreadsheet for compiling into quarterly reports. Quarterly reports will then be forwarded to the Director of Care and Director of Environmental Services for analysis and reporting.

DEFINITIONS

Incident

An incident is a potential (near miss) or actual event resulting in an undesirable outcome, and which is not consistent with the routine operation of the home.

Moderate Incident

The incident resulted in temporary impairment and clinical intervention, e.g. suture, first and second degree burns. Medication variances with potential for serious outcomes which require intervention/monitoring.

Serious Incident

The incident resulted in a fracture, hemorrhage, aspiration, serious drug variance/reaction, death or admission to hospital.

Near Miss: An incident which has the potential to cause physical or psychological injury, or property damage, but did not actualize due to chance, corrective action, and/or timely intervention

Non-Person: An incident which does not involve a person. Examples are: incorrect narcotic count, property damage etc.

Receiver: A person or thing that receives or is intended to receive the action resulting from another's responsive behavior.

Responsive Behavior is not meaningless or unpredictable but are a means to communicate unmet needs, problem solve or express distress. (Challenging Behavior Program Manual, Continuing Care, NS Department of Health and Wellness) <https://novascotia.ca/dhw/ccs/policies/Challenging-Behaviour-Program-Manual.pdf>

Root Cause is the fundamental reason for the occurrence of a problem. Asking the **5 Whys** is a technique used to explore the **cause-and-effect** relationships underlying a particular problem. The primary goal of the technique is to determine the **root cause** of a defect or problem by repeating the question "Why?". ... Not all problems have a single **root cause**.

Visitor: Anyone who is not a resident, employee or volunteer.

REFERENCES

WEV OH & S Safety Policy
WEV Disclosure of Adverse Events
WEV Resident Information Management
PHIA Act

APPENDICES

Appendix A: Multiple Falls Spreadsheet

Appendix A

Approach to Information Collection and Investigation of Incidents in Which a Resident Experiences Multiple Falls

When a resident experiences multiple falls within a short period of time (24 hours) repeatedly, and no injuries are sustained, and it has been determined that all appropriate interventions have been explored and implemented, the process after a fall will be:

- The resident is assessed by the Nurse to determine if any injury has been sustained.
- If there is an injury, an incident form will be completed.
- If it is determined, no injury has occurred; the appropriate notes will be added to the Progress Notes on the resident's chart.
- Additional information will be recorded as outlined below and this sheet will be kept in the Care Plan Binder until the end of the month and then submitted to the Manager.

Resident Name: _____ Resident Incident Form # _____ Date Initiated: _____

Date	Time	Location	Description	Initials

Resident Name: _____

Resident Incident Form # _____

Date	Time	Location	Description	Initials