Number Guide to Follow for Incident Reports

- **#1: Name of the AFC Home** as written on the AFC License (*According to LARA*, the homes are named as follows; Open Arms Stoll, Open Arms Greenhouse, Open Arms Bates, Open Arms Crest House, Open Arms New Horizons, Boichot, Carlisle)
- **#2:** The **License Number** for the home can be found on the AFC License. It can also be found on ECP by clicking on the Home, then clicking on the tab label "Building", then clicking on the "Building File", and then clicking on the "Additional Info" tab. There you will find the license number. All Open Arms' homes start with either an **AS** (Adult Small) or **AM** (Adult Medium) and followed by 9 numbers
- **#3: Home Address** can be found on the license and on ECP by clicking on the Home, then clicking on the tab label "Building", then clicking on the "Building File."
- **#4:** Phone number for the home. The number can be found on ECP by clicking on the Home, then clicking on the tab label "Building", then clicking on the "Building File."
- **#5:** The Licensee is "Open Arms Link." You **DO NOT** put the director/owner's names. Open Arms Link is a nonprofit with a board of directors.
- **#6: Person Directly Involved**: You will write the client's **FULL LEGAL NAME**. (Put staff's name there if filling out for workplace injury)
- **#7:** Check the appropriate box.
- **#8:** The street address of the home. This can be found on ECP by clicking on the Home, then clicking on the tab label "Building", then clicking on the "Building File."
- **#9:** City, State, and Zip Code for the home. This can be found on ECP by clicking on the Home, then clicking on the tab label "Building", then clicking on the "Building File."
- **#10:** Phone number for the home. The number can be found on ECP by clicking on the Home, then clicking on the tab label "Building", then clicking on the "Building File."
- **#11:** Case Number for individual <u>MUST</u> be on Incident Report. (Case numbers can be found on ECP, Resident Identification and Information Record Sheet, CEICMH Treatment Plan or Case Manager Assessment Plan, etc.) (ECP; Click on the individual, go to the tab labeled "Individual", click on "Individual File", and then click on the tab labeled "Additional Info.")
- #12: Other Persons Involved/Witnesses: Please record the FULL LEGAL NAME of any staff or visitor who was present during, or witnessed any part of, the incident. NO NICKNAMES OR DIMINUTIVE NAMES! (Example: Instead of 'Sam' or 'Kia,' use 'Samantha' and 'Nickiua.') IF another client was present or witnessed any part of the incident, please use their initials. It is IMPORTANT to emphasize that the names of other residents should not be included in someone else's incident report. In the event an incident involves two or more residents, such as a physical altercation, you MUST complete separate incident reports for each individual resident involved.

- **#13**: Check the appropriate box.
- **#14**: **Date** the incident happened. Incident Report needs to be completed after the incident, you **DO NOT** wait till the following day or your next shift.
- #15: the APPROXIMATE time the incident occurred. Don't forgot Check AM or PM
- **#16**: Write the **FULL LEGAL NAME** of the assigned employee for the resident. **IF** the resident is under one-on-one supervision, include the **FULL LEGAL NAME** of the staff member. **IF** the resident is <u>not</u> under one-on-one supervision, simply write 'All above employees' in this section.
- **#17**: Write the **location** of the incident (**Example**: Client bedroom, bathroom, front yard, town, etc.)
- **#18**: Describe the incident! Write the **4 W's** (who, what, where, when) and <u>be descriptive</u> in your writing. Remember, you are sending this to someone who may not know you, the resident, or any of the staff members, so the Incident Report needs to tell the full story. **DETAIL IS CRUCIAL!!! IF** someone has a cut or bruise on their arm, the incident report must say which arm, what part of the arm, the size of the cut or bruise, etc. (**Example**: Noticed a bruise on the inside of the right bicep about the size of a golf ball.) **ANSWER ANY QUESTIONS THE READER MAY HAVE!**
 - **Tip 1:** When introducing a staff member or the client for the first time in the report, please include their **ROLE** followed by their **FULL LEGAL NAME**. For instance, "Staff member, Charity Vadasz, noticed that there was a bruise on resident John Doe's, inner side of his right bicep about the size of a golf ball." *See how you can clearly tell who staff is and who is the resident*
 - **Tip 2:** Once a person has been introduced with their **ROLE** and **FULL LEGAL NAME**, you may subsequently refer to them by their **FIRST NAME** only. Think of it like characters in a book, movie, or story; even Forrest introduced himself as "Forrest Gump" initially and then as "Forrest". "My name is Forrest, Forrest Gump." (Another example: "Meet George Jetson!")
- **#19**: Write your **actions** and be **descriptive** in your writing! Write the **4 W's** (who, what, where, when) Remember, you are sending this to someone who may not know you, the resident, or any of the staff members, so the Incident Report needs to tell the full story. **DETAIL IS CRUCIAL!!!** Write what each staff member did in response to the incident (**Example**: Staff member, (First name if already introduced OR **role** and **full legal name** if first time being introduced), Charity asked John what happened to his arm and completed a head to toe check, looking for further signs of bruising or other abnormalities and did not find any. Charity asked John if he needed a PRN of his 500mg Acetaminophen for any pain or discomfort...)
 - **TIP FOR #18 and #19**: "If you are composing the incident report on a separate sheet of paper, you can simply write "See Attachment" for both **#18** and **#19**. When detailing the narrative, the reader will then find a clear sequence of events in order, reading **exactly** what actions happened, and in what order (what happened and what your actions were).

#20: Corrective Measures (MOST OF THE TIME MANAGEMENT WILL COMPLETE THIS SECTION): **THIS IS REQUIRED TO BE FILLED IN PER STATE AGENCIES!** I know sometimes it is difficult to come up with a corrective measure to prevent recurrence. Sometimes corrective measures are easy to come up with. For example, if a client slips on a wet floor, corrective measures could be, "staff will mop and dry the floor whenever staff notice it is wet or slippery."

Tip: Always start your Corrective Measures with, "Continue to follow the Individual Plan of Service", then continue to write the appropriate measures. (**EXAMPLE**: "Continue to follow the individual plan of service and ensure the floor is dry and free of other hazards.")

#21: Doctors Information: Complete this section **IF** the resident or staff needed to seek medical attention. All the information will be found on the discharge instructions/packet, the diagnosis will also be found in the discharge paperwork.

**PERSONS NOTIFIED SECTION is to be completed by manager OR staff member who notified the responsible parties. Remember the Licensee must make a reasonable attempt to contact the guardian/legal representative and the responsible agency (Case Manager) Per Licensing Rule R400.14311(1) **

#22: *adult protective services are rarely involved with AFC homes and LARA AFC licensing will handle the investigation should one arise*

#23: Physician or RN: Use this section if at any point you contact a doctor's office, hospice, etc., and take a directive from a nurse or physician.

#24: The **Responsible Agency** is the **Case Manager** from CEICMH. Write their **LEGAL FULL NAME**. You can find the Case Manager's name on any CEICMH paperwork or in ECP (*Click on the individual, go to the tab labeled "Individual", click on "Individual File", and then click on the tab labeled "Contacts".)*

#25: If applicable, write the guardian's **FULL LEGAL NAME! IF** you do not know the guardian's name it can be found on multiple places on ECP (*Click on the individual, go to the tab labeled "Individual", click on "Individual File", there you will find the guardians name in two spots OR from there click on the tab labeled "Contacts".)*

#26: If the Office of Recipient Rights were notified, write the **FULL LEGAL NAME** of your Office of Recipient Rights Advisor.

#27: **IF** you had to have law enforcement involved, **ASK FOR THEIR BUSINESS CARD!** That way we have their **FULL LEGAL NAME** and contact information for the report. (*if you receive a business card from an officer, please staple it to the corner of the incident report.*)

#28 and #29: Write the **FULL LEGAL NAME** and title of anyone else you notified or contacted (*Example*: Mascline Chiduma, Administrator **OR** Christopher Wolfinger, Pharmacist at Ascension Michigan Pharmacy)

#30: Write the date and time you notified the person(s).

#31: Person completing the Incident Report must sign!!!!

#32 The Person completing the Incident Report <u>must</u> print their **FULL LEGAL NAME** and their **Job Title!** (**Example**: Mary Joe, DSP **OR** Thomas Thompson, Patient Care Tech)

#33: **PUT THE DATE YOU SIGNED YOUR NAME!** (Good Rule of Thumb, 99% of the time you are required to sign your name...you have to date afterwards.)

#34, #35, and #36: This section is used by the Licensee or the Administrator (see below for each home's respected role).

Open Arms Bates:

Licensee Designee: Simbarashe Chiduma Administrator: Mascline Chiduma

Boichot:

Licensee Designee: Simbarashe Chiduma Administrator: Mascline Chiduma

Carlisle:

Licensee Designee: Simbarashe Chiduma Administrator: Mascline Chiduma

Open Arms Crest Home:

Licensee Designee: Simbarashe Chiduma Administrator: Mascline Chiduma

Open Arms Greenhouse:

Licensee Designee: Simbarashe Chiduma Administrator: Mascline Chiduma

Open Arms Stoll:

Licensee Designee: Simbarashe Chiduma Administrator: Mascline Chiduma

Open Arms New Horizons:

Licensee Designee: Simbarashe Chiduma Administrator: Mascline Chiduma

IMPORTANT: Make sure everything is completed and descriptive and have your manager's look over the Incident Report so they can check it for thoroughness and have you add any missing information. **NOTE**: Managers, please make sure staff was being **descriptive**...see my "golf ball reference!"

ALL STAFF NEED TO BE MINDFUL OF THE IMPORTANCE OF COMPLETING WELL-DETAILED AND THOROUGH INCIDENT REPORTS. IT IS CRUCIAL FOR STAFF MEMBERS TO UNDERSTAND THE IMPORTANCE OF BEING PRECISE AND DESCRIPTIVE WHEN DOCUMENTING THE EVENTS AND ACTIONS TAKEN. INCIDENT REPORT <u>CAN</u>, AND <u>HAVE</u> <u>BEEN</u>, USED IN COURT HEARING, LAWSUITS, INVESTIGATIONS, ETC.

IF THERE IS ANY QUESTIONS OR IF YOU NEED ANYTHING CLARIFIED, PLEASE REACH OUT TO YOUR SUPERVISOR AND THEY WILL DO THEIR BEST TO ASSIST YOU!

ON BEHALF OF OPEN ARMS LINK, WE WANT TO THANK EACH AND EVERY ONE OF YOU FOR YOUR HARD WORK AND DEDICATION! YOU ARE GREATLY APPRECIATED!