

Individual Name: Record Individual's name

Incident # Record Incident #

**DMHDDAS Incident Report and Injury of Unknown Source Investigation Review
Audit Tool Instructions**

Date of Incident	Date of Review	Reviewer	Investigator / Team Leader	Facility
Record the date of the incident	Record the date of the Review	Record the Reviewer's name	Inv: Record the investigator's name TL: Record the Team Leader's name	Record the name of the facility

Instructions: **All** information to complete the Incident Report Investigation Review is obtained from the **Incident Report and Injury of Unknown Source Investigation Review**.

For further information related to the Standards, see the DMHDDAS Facility Risk Management Protocol (FRMP) effective November 1, 2008

Standard for Facility Responsibility Incident Report		Yes	No	Comments <i>Section may be used to clarify a response given, but may not be used as a stand-alone response.</i>
1.	All applicable areas on Page 1 of the Incident Report are completed correctly.			This standard is YES if: a. All applicable areas on Page 1 are completed correctly. This standard is NO if: a. Any applicable area on Page 1 that should have been completed is blank or completed incorrectly.
2.	All applicable areas on Page 2 of the Incident Report are completed correctly.			This standard is YES if: a. All areas on Page 2 are completed correctly. This standard is NO if: a. Any applicable area on Page 2 that should have been completed is blank or completed incorrectly.
3.	All applicable areas on Page 3 of the Incident Report are completed correctly.			This standard is YES if: a. All applicable areas on Page 3 are completed correctly. This standard is NO if: a. Any applicable area on Page 3 that should have been completed is blank or completed incorrectly.
4.	All applicable areas on Page 5 of the Incident Report are completed correctly.			This standard is YES if: a. All applicable areas on Page 5 are completed correctly. This standard is NO if: a. Any applicable area on Page 5 that should have been completed is blank or completed incorrectly.
Standard for Facility Responsibility Injury of Unknown Source Investigation				Comments <i>This section may be used to clarify a response given, but may not be used as a stand-alone response.</i>
5.	All applicable areas on Page 1 of the Injury of Unknown Source Investigation Report are completed correctly.			This standard is YES if: a. All applicable areas on Page 1 are completed correctly. This standard is NO if: a. Any applicable area on Page 1 that should have been

<i>Standard for Facility Responsibility Incident Report</i>		<i>Yes</i>	<i>No</i>	<i>Comments</i> <i>Section may be used to clarify a response given, but may not be used as a stand-alone response.</i>
				completed is blank or completed incorrectly.
6.	All applicable areas on Page 2 of the Injury of Unknown Source Investigation Report are completed correctly.			This standard is YES if: a. All applicable areas on Page 2 are completed correctly. This standard is NO if: a. Any applicable area on Page 2 that should have been completed is blank or completed incorrectly.
7.	All applicable areas on Page 3 of the Injury of Unknown Source Investigation Report are completed correctly.			This standard is YES if: a. All applicable areas on Page 3 are completed correctly. This standard is NO if: a. Any applicable area on Page 3 that should have been completed is blank or completed incorrectly.

Standard for Supervisor Responsibility:

Any "blank" blocks (having zero information in the Investigation should be marked as "NO, does not meet the standard" in this audit tool.

<i>Standard for Supervisor Responsibility Injury of Unknown Source Investigation</i>		<i>Yes</i>	<i>No</i>	<i>Comments</i> <i>This section may be used to clarify a response given, but may not be used as a stand-alone response.</i>
1.	Immediate steps to SECURE THE SCENE are recorded.			This standard is YES if, as applicable , the following items are recorded: a. First aid or medical care has been provided or obtained (may be found here and/or on Page 3 of the Incident Report under Medical Assessment); and b. Interventions were put in place to ensure the safety of all individuals, staff, and other persons; and c. Photographs were obtained of all visible injuries or photographs to document that no injury is present; and d. Persons were prohibited from removing or destroying potential or actual evidence; e. Potential witnesses were kept at the scene, and i. Kept separated when possible, while ensuring adequate supervision of all individuals; ii. If separation was not possible, assigned or requested an additional supervisor to the scene to minimize the potential witnesses from discussing the incident among themselves; iii. Separated as soon as replacement staff coverage is assigned and present, or f. A clear reason for not doing elements a-e as applicable are recorded. This standard is NO if, as applicable : a. Elements described in a-e above are not recorded, or

<i>Standard for Supervisor Responsibility Injury of Unknown Source Investigation</i>		<i>Yes</i>	<i>No</i>	<i>Comments</i> <i>This section may be used to clarify a response given, but may not be used as a stand-alone response.</i>
				b. A clear reason for not doing elements a-e is not documented.
2.	State the investigatory question.			<p>This standard is YES if:</p> <p>a. The investigator question is present and begins with "How did 'xyz' injury occur.....?"</p> <p>This standard is NO if:</p> <p>a. The investigatory question is not present; or</p> <p>b. The question is present but does not address how the injury occurred.</p>
3	Describe how the injury was discovered.			<p>This standard is YES if:</p> <p>a. The circumstances surrounding the injury are described, i.e. whether the individual brought the injury to staff's attention or whether the injury was found during bathing, meal time, engaging in active treatment, etc.</p> <p>This standard is NO if:</p> <p>a. The circumstances surrounding the injury are not described.</p>
4.	Describe the sequence of protections implemented to eliminate potential, immediate and future harm.			<p>NOTE: This section is similar to, but not exactly like SECURE THE SCENE. Secure the Scene typically addresses IMMEDIATE protections, while this section also addresses protections from potential and future harm.</p> <p>This standard is YES if:</p> <p>a. Sequence of immediate protections to eliminate potential and future harm is recorded (removed the area rug, wiped up spilled liquid, called in work order, separated individuals, additional staff assigned to aggressor, etc.), or</p> <p>b. A clear reason for not describing immediate protections is recorded.</p> <p>This standard is NO if:</p> <p>a. Sequence of immediate protections to eliminate potential and future harm is not recorded, or</p> <p>b. A clear reason for not describing immediate protections is not recorded.</p>
5.	Review nursing notes for past 24 hours. Record information that assists in identifying cause of injury.			<p>This standard is YES if:</p> <p>a. It is evident the past 24 hours of nursing notes have been reviewed, and</p> <p>b. Information from the nursing notes is recorded that assists in identifying the cause of the injury, or</p> <p>c. It is recorded the nursing notes do not address the specific injury.</p>

Standard for Supervisor Responsibility Injury of Unknown Source Investigation		Yes	No	Comments <i>This section may be used to clarify a response given, but may not be used as a stand-alone response.</i>
				<p>This standard is NO if:</p> <ul style="list-style-type: none"> a. It is not evident the past 24 hours of nursing notes have been reviewed, or b. Information from the nursing notes is not recorded that assists in identifying the cause of the injury, or c. It is not recorded the nursing notes do not address the specific injury.
6.	Review home logs for the past 24 hours. Record information that assists in identifying cause of injury.			<p>This standard is YES if:</p> <ul style="list-style-type: none"> a. It is evident the past 24 hours of home logs have been reviewed, and b. Information from the home logs is recorded that assists in identifying the cause of the injury, or c. It is recorded the home logs do not address the specific injury. <p>This standard is NO if:</p> <ul style="list-style-type: none"> a. It is not evident the past 24 hours of home logs have been reviewed, or b. Information from the home logs is not recorded that assists in identifying the cause of the injury, or c. It is not recorded the home logs do not address the specific injury.
7.	<p>List the names of the "witnesses" interviewed, including the date and time they were interviewed, list in the order interviewed.</p> <p>Attach Witness Statements</p>			<p>This standard is YES if:</p> <ul style="list-style-type: none"> a. It is evident the names of the reporter, individual who has the injury, relevant witnesses, other relevant persons, and persons who provided initial first aid/medical treatment, - in chronological order, including title, date, and time were recorded, and b. If a person(s) was interviewed more than one time, the name and other information continued in the chronological order and treated as a new item in the list; and c. Statements were obtained from the individual discovered with an injury of unknown source, including those whose ability to communicate is impaired, and d. Statements were obtained from all relevant witnesses, including staff and those individuals whose ability to communicate is impaired, staff who provided initial first aid/medical treatment, and e. All statements were attached to the investigation form, or f. A clear reason for NOT doing any element (a-e) above is recorded. <p>This standard is NO if:</p> <ul style="list-style-type: none"> a. Any elements a-e above are not recorded, or b. If any elements a-e above are not recorded, a clear reason for not doing so is also not recorded.

Standard for Supervisor Responsibility Injury of Unknown Source Investigation		Yes	No	Comments <i>This section may be used to clarify a response given, but may not be used as a stand-alone response.</i>
8.	List documents gathered in the course of the investigation. Attach documents			<p>This standard is YES if:</p> <ul style="list-style-type: none"> a. Copies of Home or Unit Logs are attached to the investigation, and b. Copies of Nursing Notes are attached to the investigation, and c. As applicable, copies of other documents, such as Incident Reports, diagrams, photographs, time cards, e-mails, safety sheet, diagnosis code sheet, IPP/ILP/treatment plan, activity schedule, behavior plans, etc. are attached to the investigation, or d. A clear reason for not attaching any elements a-b above is recorded, or e. A clear reason for not attaching an applicable document in element c is recorded. <p>This standard is NO if:</p> <ul style="list-style-type: none"> a. Copies of Home or Unit Logs are not attached to the investigation, or b. Copies of Nursing Notes are not attached to the investigation, or c. Applicable copies of other documents, such as Incident Reports, diagrams, photographs, time cards, e-mails, safety sheet, diagnosis code sheet, IPP/ILP/treatment plan, activity schedule, behavior plans, etc., are not attached to the investigation, or d. A clear reason for not attaching any elements a-b above is not recorded, or e. A clear reason for not attaching an applicable document in element c is not recorded.

Standard for Risk Manager/Investigator Responsibility Injury of Unknown Source Form		Yes	No	Comments <i>This section may be used to clarify a response given, but may not be used as a stand-alone response.</i>
1.	Analysis and Findings are recorded.			<p>This standard is YES if:</p> <ul style="list-style-type: none"> a. Analysis and Findings are recorded based on information provided in the Investigation. <p>This standard is NO if:</p> <ul style="list-style-type: none"> a. Analysis and Findings are not recorded based on information provided in the Investigation.
2.	Facility Follow-up is recorded.			<p>This standard is YES if:</p> <ul style="list-style-type: none"> a. Facility follow-up is recorded based on information provided in the Investigation; or b. It is clearly stated facility follow-up is not warranted. <p>This standard is NO if:</p> <ul style="list-style-type: none"> a. Facility follow-up is not recorded based on

Standard for Risk Manager/Investigator Responsibility Injury of Unknown Source Form		Yes	No	Comments <i>This section may be used to clarify a response given, but may not be used as a stand-alone response.</i>
				information provided in the Investigation; or b. It is not clearly stated facility follow-up is not warranted.

Standard for Team Leader Responsibility Injury of Unknown Source Form		Yes	No	Comments <i>This section may be used to clarify a response given, but may not be used as a stand-alone response.</i>
1.	A description of how the incident affected the individual is recorded.			<p>This standard is YES if:</p> <ul style="list-style-type: none"> a. The incident's effect on the Individual is recorded; or b. It is clearly stated the incident did not have an effect on the Individual. <p>This standard is NO if:</p> <ul style="list-style-type: none"> a. The incident's effect on the Individual is not recorded, or b. It is not clearly stated the incident did not have an effect on the individual.
2.	If the YES block is checked, indicating additional follow-up is needed - additional follow-up is recorded.			<p>This standard is YES if:</p> <ul style="list-style-type: none"> a. The YES box is checked on the investigation AND follow-up is recorded; or b. The NO box is checked. <p>This standard is NO if:</p> <ul style="list-style-type: none"> a. The YES box is checked on the investigation AND follow-up is not recorded; or b. The NO box is not checked, or c. Neither the YES or No box is checked.