Leamington Mennonite Home Long Term Care

QUALITY & RISK MANAGEMENT POLICY AND PROCEDURE

CATEGORY:	SUBJECT:	SECTION:
Incident Reporting	Resident Incident Reporting	D
		POLICY:
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DATE:	Administrator's Signature:	
July 12, 2022	_	

RESIDENT INCIDENT REPORTING

POLICY:

All incidents involving residents will be reported through the Risk Management module in the electronic documentation platform for the following incidents:

- Witnessed fall
- Unwitnessed fall
- Fall During Staff Assistance
- Verbal Aggression Initiated
- Verbal Aggression Received
- Physical Aggression Initiated
- Physical Aggression Received
- Alleged Abuse

- Alleged Neglect
- Elopement
- Choking
- Self-Inflicted Injury
- Injury of Unknown Cause
- Smoking Injury
- Unsafe Smoking

PROCEDURE:

The Nurse will:

- 1) Ensure the resident is safe and provide immediate first aid, if needed.
- 2) Complete an assessment of the resident and provide intervention as necessary.
- 3) Initiate and complete documentation of the incident in the PointClickCare (PCC) Risk Management module and complete the User Defined Assessment as part of the incident.
- 4) Notify next of kin, family, or substitute decision maker as well as the physician of the incident.
- 5) Report Sentinel/Adverse events immediately to the Director of Care or designate.
- 6) Lock and sign off nurse's section of Risk Management once initial documentation is complete.

The Director of Care or designate will:

- 1) Review PCC Risk Management dashboard for new incidents and conduct an investigation and document investigation findings as required.
- 2) Follow up on resolution of risk areas identified.
- 3) Sign off the Director of Care section PCC Risk Management to indicate awareness of the incident and complete further investigations required.
- 4) If an incident meets regulatory reporting criteria for critical incidents or mandatory reports, submit the critical incident as per regulatory requirements.
- 5) Report themes and trends to appropriate committees, including Daily Morning Leadership and Leadership & Quality Committee.

The QRM Lead will:

- 1) Review PCC Risk Management dashboard for new incidents and conduct investigation as required.
- 2) Sign off the QRM Lead section of the PCC Risk Management to indicate awareness of the incident and ensure that follow up actions/investigation completed as required.
- 3) Follow up on resolution of risk areas identified.
- 4) Report incidents and status on Weekly Operations Report.
- 5) Trend resident incident reports and review them at the appropriate committees, including Daily Risk, Leadership & Quality Mgt. team committee.