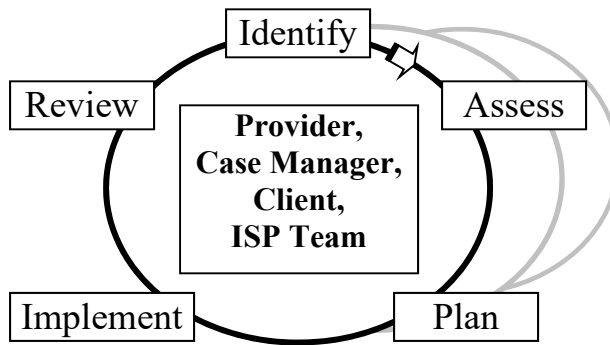


“Cruisin’ the Loop”



The Loop is a technique you can use to avoid reacting to difficult situations in unhelpful ways.

If something isn't working, the loop should tell you it's time to try something else.

IRs or Progress Notes can provide the “history” that takes you through the

- 1. Identify**
What happened?
- 2. Assess:**
Why did it happen?
- 3. Plan**
What can be done? Measurable, specific steps
- 4. Implement**
Show that the plan is being carried out
- 5. Review: Did it work? (When you Review, you are really “re-identifying,” or “Closing the Loop”)**
 - Did the situation change?
 - Does it need to change more?
 - If it didn't change, what else can we do?

When Should I Write an IR (Incident Report)?

Report immediately by phone, then follow up with a written IR:

- Suicide attempt
- Death
- Fire, Police, Ambulance, 911
- Abuse, alleged or actual
- Hospitalization
- Major change in medical status
- Unauthorized restraint/Emergency restraint
- Major behavioral incident

Send these IRs to the Case Manager within 5 working days or less:

- Physical Aggression
- Illness
- Accident
- Non-Routine visit to the doctor
- AWOL
- Restraint (no injury)

Advice: *IF IN DOUBT, WRITE IT OUT!* IR's are a critical means of communication within the structure of the case management support system for children and adults with I/DD!

Categories of Incident Reports:

Physical Aggression

Hitting

Slapping

Pushing

“Charging”

Throwing

Spitting (This list is not comprehensive.)

- Attempted physical aggression IS physical aggression. If someone tries, but misses, report it.
- If someone hits, but there is not visible injury, report it anyway (injuries can show up later).
- When there is physical aggression, you may have two IR’s to write. One about the person who was aggressive, and another about the person who was the victim of the aggression.

Serious Illness or Accident: Report accidents even if there is no injury. Accidents can indicate a condition that needs immediate attention and injuries can show up later!

Example: *Johnny fell down the stairs but he wasn’t hurt.*

This is reportable because Johnny COULD get seriously hurt falling down the stairs. Because what is happening is potentially dangerous, there is a need to find out why it happened, and if it indicates a change in Johnny’s medical condition.

It’s also important to report accidents where there is no injury because bruising or other kinds of injury may not show up right away. If an injury shows up later, and there’s a record of an accident, you’ll be able to show where the injury came from.

Report accidents even if they are common:

Example: *Sally fell off her bike, but she falls off her bike every other day.*

This is reportable because it may indicate a serious medical condition. It could also be that Sally’s fine, but she just needs some accommodations when riding when her bike. Either way, it’s important to know so that appropriate action can be taken.

Non-Routine Visit to the doctor:

For example: *Client had a fever, so we called and they worked her in.* This is reportable.

Suicide Attempt:

The OAR says attempts are reportable. Providers commonly report “ideation” as well, as a preventative measure. “Ideation” means client is talking about suicide, telling you he wants to kill himself, telling you he has a plan to kill himself. **Don’t take any such talk lightly.**

Death

Death is **always** reportable, no matter what the circumstances.

Fire, Police, Ambulance Write an IR **any** time these people are called, or **any** time they are involved in with your resident!

Restraint

If an approved restraint is used, **report!**

If an **unauthorized restraint** is used, or if an **untrained person** uses a restraint, report by phone **right away**, then follow up with an IR!

If either of these happened in an emergency and there was no other way to protect the individual's health and safety, then it's okay, but **you still have to report it.**

Abuse : Report immediately, then follow up with an IR, if you see, hear about, or suspect:

Physical or sexual abuse

Neglect

Verbal abuse

Physical injury that "doesn't add up"

Unauthorized restraint or restriction done for reasons other than health or safety

Financial exploitation

New Abuse Definition (July 2010) categories to know (if you don't know the detailed definitions it's OK, just report if you think these seem likely to have happened or are happening:

- | | |
|---|--|
| <input type="checkbox"/> ABANDONMENT | <input type="checkbox"/> INVOLUNTARY SECLUSION |
| <input type="checkbox"/> DEATH | <input type="checkbox"/> WRONGFUL RESTRAINT |
| <input type="checkbox"/> FINANCIAL EXPLOITATION | <input type="checkbox"/> SEXUAL ABUSE |
| <input type="checkbox"/> NEGLECT | <input type="checkbox"/> VERBAL ABUSE |
| <input type="checkbox"/> PHYSICAL ABUSE | |

What Goes In My IRs?

OAR 309-040-0052 (4)(f)

Your reports must include:

- How and when the incident occurred;**
- Who was involved:** This means not only the person affected, or who the incident happened to, but also who saw, who helped and who was otherwise affected (if Johnny hit, who did he hit);
- What actions were taken;**
- What the outcome was, for the person affected:** This is where you close the loop, where you say how what you did will help prevent the incident from re-occurring.

Additional Guidelines:

Report on what was happening before the incident (Antecedent): Focus on things that may be related to the incident, things that may have caused it or set up conditions for it to happen. Report this information so that the team can begin to figure out why it happened or is happening, and so that steps can be taken to prevent further occurrences.

Report facts: Say what you saw, or what the person said to you. *For example, say, "Johnny fell down the stairs," and "Johnny said he fell because he was dizzy."*

Avoid speculation: For example, do not say, *"Johnny fell down the stairs. I think he was dizzy."*

Action taken: What did you do, not only to respond to the immediate incident, but also to avoid repeat incidents?

Outcome: Did your actions produce desirable results, that is, will future incidents be prevented? Some things cannot be completely prevented, but outcomes can be improved, and the possibility of future incidents can be reduced.

Incident Report Form