

**How To Respond To and Report An Unexpected Serious Illness or Injury (911 Emergency)
How To Prepare For Emergency (Room) Department Visits and Hospitalization (911 Incident)
How to Complete an Incident Report**

**Course 1760
Record 1853**

Rationale

The people who live at Axis homes are vulnerable to illness and injury and some cannot communicate what is wrong with them. They require careful and constant monitoring of their health condition. Accidents can and do happen and some people can become injured or very sick, very quickly. They may require emergency treatment and if so, it is important not to panic but respond immediately. Your quick action can help to save a person's life. The first step is to provide first aid and get the person medical care by calling 911 and the Axis nurse. Later, you must document what happened in an incident report and contact the person's team members to inform them.

Policy

Any Axis employee who becomes aware of an unexpected serious illness or injury that they consider a life threatening medical emergency, will respond by calling 911 and provide first aid as needed (based upon training received from first aid/CPR courses). Do not stop until the emergency personnel are inside the house and have physically taken over from you.

Any Axis employee who becomes aware of an unexpected serious illness or injury that is not a life threatening medical emergency, will still immediately contact the Axis nurse on duty and follow their instructions. If a nurse is not available, the AXIS employee will immediately contact 911 and provide first aid as needed (based upon training received from first aid/CPR courses) until emergency personnel arrive and then try to call the Axis nurse again and if still unavailable, call the Axis Manager on Call at 612-802-7089.

If an Axis nurse is available, the nurse will assess the individual's condition and if it is determined that a serious illness or injury has occurred, the Axis nurse will immediately call 911 and arrange for transportation of the individual to the hospital emergency department.

When the ambulance leaves the house, a staff person from the house must take the Axis van and meet the ambulance at the hospital and stay with the person until they are admitted or sent home. If only one staff is present at the house, call the Axis Manager on Call to arrange for another Axis staff person to meet the person at the hospital. If no one else is available, the Manager on Call will meet the person at the hospital.

As soon as the individual is safe, the direct support staff at the Axis home will complete an incident report and follow the below instructions on How To Report A Serious Illness or Injury and Complete an Incident Report (Direct Support Staff Responsibilities)

As soon as the individual is safe, the direct support staff at the Axis home will contact the following persons and report the incident to:

- The Axis nurse (Axis Seneca 651-426-3546 or Axis St. Michael 763-717-4967)
- The Axis Manager On Call at 612-802-7089
- The Person's Guardian (see Emergency Contacts in Individual Database or in chart)
- The Person's Case Manager (see Emergency Contacts in Individual Database or in chart)

As soon as the individual is safe, the Axis nurse will contact the following persons and report the incident to:

- The Axis Manager On Call at 612-802-7089
- The Axis Administrator at 651-357-1107

Any incidents involving allegations of abuse or neglect and incidents of unknown origin must be reported immediately to the Axis Administrator as soon as the individual is safe. See above phone numbers. (i.e., "immediately" means there should be no delay between staff awareness of the allegation and reporting to the administrator unless the situation is unstable at the time the allegation comes to the attention of the staff. In this case, reporting should occur as soon as the safety of all clients is assured and all necessary emergency measures have been taken) and within 24 hours to the common entry point for adults, or to child protection if the individual is a minor.

The Axis Administrator will request that the DPS, Program Supervisor or Manager on Call initiate and complete an investigation of all incidents involving an unknown injury, a serious injury or suspected abuse or neglect.

The person assigned by the Administrator to investigate the incident will write a summary of the incident and consult again with the Axis Administrator when it is complete. Afterwards, the person who conducted the investigation will call the Common Entry Point to report it within 24 hours of the incident. Afterwards, the person who conducted the investigation will complete the following forms:

- Death or Serious Injury Report Fax Transmission Cover Sheet and the Death or Serious Injury Report form.

For ICF/DD programs, the person who completed the reports will then fax them within 24 hours to the:

- MDH Office of Health Facility Complaints and the Office of the Ombudsman for ICF/DD programs.

For Waiver programs, the person who completed the reports will then fax them within 24 hours to the:

- DHS Division Of Licensing and the Office of the Ombudsman for Waiver programs

The Axis Nurse and House Supervisor must follow-up on all incident reports to determine if any additional investigation or medical appointments are needed and to implement strategies to help prevent similar incidents from reoccurring.

Quick Summary of Procedures (You are responsible to read and follow this entire document)

[] If a life threatening emergency occurs, call 911 immediately.

[] Provide First Aid or CPR until emergency personnel arrive

[] Print out two copies of a generic referral and check the first page of the referral to determine which hospital the ambulance should take the person to.

[] If the person has advance directives, give a copy to the emergency personnel when they arrive at the house.

[] Determine who will go to hospital and who will stay to do incident report. If working alone call MOC 612-802-7089.

[] Prepare the following items to take to the hospital.

- the person's day timer,
- some extra clothes, a jacket, shoes and socks if needed.
- feeding tube extension if needed.
- another generic referral form and directions to the hospital (if needed)
- the person's wheelchair (if applicable)

[] Go to hospital and stay with person until admitted to a normal hospital room or is discharged.

[] If the person is admitted, meet with the person's hospital nurse and note the room number and nurse station phone number.

[] Person remaining at house calls Axis nurse and does an incident report.

A. Definitions of a Serious Illness or Injury

Serious Illness of an individual shall be defined as:

1. Difficulty breathing,
2. Chest pain,
3. Loss of consciousness,
4. Heavy bleeding,
5. Temperature over 103 degrees
6. Seizures lasting more than 3 minutes if individual does not have specific protocol, etc.)

Serious injury of an individual shall be defined as:

1. Fractures (e.g. broken or cracked bones);
2. Dislocations (e.g. elbow/finger/shoulder/knee joints);
3. Evidence of internal injuries;
4. Head injuries with loss of consciousness;
5. Lacerations (e.g. deep cut) involving injuries to tendons or organs or for which complications are present;
6. Extensive second degree or third degree burns and other burns for which complications are present (e.g. blisters, deep burns);
7. Extensive second degree or third degree frostbite, and other frostbite for which complications are present;
8. Irreversible mobility or avulsion of teeth (e.g. tooth knocked out);
9. Injuries to the eyeball that puncture the eyeball, that cause bleeding in the eye, or any injury requiring care to maintain the physical structure or vision, or that result in threatened loss of eyeball or visual acuity;
10. Ingestion of foreign substances and objects that are harmful (e.g. swallowing poison or choking on a nonfood object);
11. Near drowning;
12. Heat exhaustion or sunstroke;
13. All other injuries considered serious by a physician

B. How To Respond to a Serious Illness or Injury

1. If a life-threatening emergency occurs, call 911 immediately. If you are working alone and become aware of an unexpected serious illness or injury that you consider a life threatening medical emergency, call 911 immediately and provide first aid as needed (based upon training received from first aid/CPR courses) until emergency personnel arrive. If two staff are present, one staff should provide First Aid or CPR and the other staff should call 911 and follow the below instructions in the section titled Before the Ambulance Arrives.

2. If not a life threatening emergency, you must still call the Axis nurse. For any unexpected illness or serious injury, you must contact the Axis nurse immediately and follow their instructions. If a nurse is not available, you must immediately contact 911 and provide first aid as needed (based upon training received from first aid/CPR courses) until emergency personnel arrive.

Phone Number for Axis Nurse at Seneca = 651-426-3546

Phone Number for Axis Nurse at Saint Michael = 763-717-4967

3. Tell the Axis nurse what happened and describe the illness or injury. If an Axis nurse is available, describe to the nurse who you are and what house you work at and the name of individual who is sick or injured. Ask what the nurse's name is as you will need to know this when you do the incident report. Report the person's vital signs and describe the size and location of the injury. If known, describe how it happened. The medication cabinet contains plastic wound measurement guides if needed.

4. Follow the nurse's instructions for First Aid and/or calling 911. If an Axis nurse is available, the nurse will assess the individual's condition and if they determine that a serious illness or injury has occurred, the Axis nurse will immediately call 911 or direct you to call 911 in order to transport the individual to the hospital. Provide first aid as needed (based upon training received from first aid/CPR courses) until emergency personnel arrive. If giving CPR, do not stop until the emergency personnel are inside the house and have physically taken over from you. Follow any specific instructions given to you by the nurse.

5. Plan for the arrival of emergency personnel. If the person is to be sent by ambulance to the emergency department, follow the below instructions.

C. How to Prepare For Emergency Department Visits and Hospitalization (From Record 1853)

Before The Ambulance Arrives

1. Continue providing First Aid or CPR until emergency personnel arrive. If two staff are present, one staff should be providing First Aid as instructed by the nurse and the other staff must complete the following steps. If only one staff is present, do not stop CPR until the emergency personnel are inside the house and have physically taken over from you.

2. Print out two copies of a generic referral: The other staff person or yourself, if working alone, should print out two copies of a generic referral. To print the generic referral form, go to the Timecards menu and click on the "Doctors Orders/MAR" button in the fourth row, the second button to the left. When the Doctors Orders Main Menu appears, click on the yellow words "Generic Referral" at the bottom left side of the page under the Other Database Links section. This will bring you to the Select Individual ID screen. Click on the small white circle next to the person's initials and then click on the blue "Continue" button at the top right of the screen. When

the referral form appears, click on the yellow "Print" button in the upper left hand corner and when the print dialog box appears click the blue "Print" button. To print the second copy, click on the yellow "Print" button in the upper left hand corner again and when the print dialog box appears click the blue "Print" button. After the forms are printed, you will be returned to the referral form screen. Click on the blue "Continue" button on the top right of the screen. This will take you back to the Doctor's Orders screen. Click on the small red dot at the top left of the page to close the page. This will return you to the referral form. Again, click on the small red dot at the top left of the page to close the page. This will return you to the Timecards screen. If for some reason, the computers are down, call the Axis nurse and have them fax a generic referral to you.

3. Determine which hospital the ambulance should take the person to. The person who printed the generic referrals should determine which hospital the ambulance should take the person to. This is listed on the first page of the generic referral form under the Contacts section. Look under the first column for the words Hospital Preference. This is the hospital you should tell the ambulance personnel to take the person to. This information is also listed on the person's Emergency Information sheet in their day timer and chart.

4. Fill out the first page of the generic referrals. The person who printed the generic referrals should fill out the first page of the referral form. Write the date in the top left corner. Write the letters "ED" (Emergency Department) on the "Evaluating Physician' Name" line. Write the name of the hospital on the "Location of Appointment" line and the approximate time the ambulance was called on the Time of Appointment line. Write a brief description of why the person is being sent to the Emergency Department in the "Reason for Referral" box.

5. Fill out the time of last medications on the generic referral. Direct support staff should review the last medications given and write the time of last medications on page 3 of the generic referral form under the box stating Time of Last Medication. Look at today's printed MAR for the person and compare it to the last page of the referral form which lists the daily MAR and determine which meds have been given. Draw a line after the last med given and then write the time of the last med given in the box on page 3 where it says "Time of last medication/nutrition administration/PRNs given today. Remember that the printed-paper MAR is the most current and accurate source because sometimes people may not have documented yet in the computer.

6. Photocopy the person's code status/advance directives. If the person has a health care directive, the person who printed the generic referrals must also locate and copy the person's code status/advance directives. This will be located in the very back of the person's medical book and has the signature of the person's guardian on it. Photocopy this form and give it to the emergency personnel as soon as they arrive.

When The Ambulance Arrives

1. Do not stop first aid or CPR until emergency personnel have taken over. In other words, don't stop CPR when the ambulance arrives. Continue first aid or CPR until the emergency personnel have entered the house and taken over from you. This is very important.

2. Inform the emergency personnel what happened. Describe the person's injury or illness. If needed, refer to the generic referral form and describe the person's diagnosis, allergies, hospital preference and a list of medications. The person's diagnosis and allergies are listed on page 3; the person's hospital preference is on page 2 and a list of their medications is on page 1 of the generic referral.

3. Give the emergency personnel a photocopy of the person's advance directives.

4. Give one copy of the generic referral form to the emergency personnel. Ask them to give it to the Emergency Department staff.

When The Ambulance Leaves

1. Determine who will stay and who will go to the hospital. Whenever someone goes to the hospital, an Axis staff must also go to the hospital to provide information to the doctors and nurses about what happened and stay with the person until they are admitted to a normal hospital room or sent back home. If two staff are working at the house, one staff must go to meet them at the hospital while the other person stays at the house and completes an incident report.

2. If only one staff is working at the house, call the Axis Manager on Call (MOC). If you are working alone at the house, it is still required that an Axis staff goes to meet the person at the hospital. You must call the Axis Manager on Call to arrange this. The phone number of the Axis Manager on Call is 612-802-7089. Tell the MOC who the person is and why they are being sent to the hospital, explain which hospital they were sent to and if you sent a copy of the generic referral with the emergency personnel.

3. Prepare the following items to take to the hospital. The staff person who is going to the hospital (if leaving from Axis Home) must prepare:

- a travel bag for the person containing the person's day timer, some extra clothes, a jacket and shoes and socks if needed.
- feeding tube extension if needed.
- a generic referral form
- the person's wheelchair (if applicable)
- directions to the hospital (if needed).

4. Print directions to the hospital. If you do not know how to get to the hospital, follow the instructions in Easy Axis 2911 titled How to Use PCCR Contacts to Find Addresses and Phone Numbers and How to Use Mapquest to Find Driving Directions.

5. Go to hospital and remain there until the person is admitted or discharged. The person going to the hospital takes the above items and the Axis van and meets the individual at the emergency department. They must remain with the person until they are admitted to a regular hospital room or sent back to the Axis home.

6. Complete an incident report. The remaining staff at the house must complete an incident report. Follow the instructions below in the section How To Report A Serious Illness or Injury and Complete an Incident Report (Direct Support Staff Responsibilities).

D. What to Do While at the Emergency Department or Hospital

Upon Arrival At The Hospital

1. Check in with the Emergency Department Intake Nurse. When you go to the hospital emergency department, check in at the desk and ask if the person has arrived by ambulance yet. Explain who you are and where you work. Provide the intake nurse with basic information about the person. Explain what happened and why the person was sent to the hospital. If asked about the person's date of birth, insurance numbers and list of current medications, this information is all on the first page of the form.

2. Meet person and emergency doctors/nurse and explain what happened. Upon arrival at the

emergency department, the person will be put in a temporary room and be seen by the emergency department doctors. Go and stay with the person and answer any questions that the hospital staff may have. Tell them what happened. Describe the person's symptoms, allergies and any special diagnoses or medical issues the person has.

3. Show them the contents of the generic referral. Most of the information they need will be on the generic referral form. If asked a question that you do not know the answer to, direct them to the generic referral form and have them read what is written. It shows their list of medications, PRN medications, recent immunizations is on the right side and the phone numbers of their primary and specialist doctors, guardian, family members and caseworker. It also includes their allergies, diagnoses, nutrition orders and medical devices, It should show the time of last medications given. One page of the referral needs to be filled out and signed by the doctor when you are finished. The daily MAR is listed on last page of the generic referral. Inform the hospital personnel of the time of the last medications given. Finally, give the emergency department nurse or doctor the generic referral form and tell them that you will need it filled out and signed when they are finished.

4. Answer doctor's questions for additional information. If the nurses or doctors at the hospital need additional information, ask them for their fax number and then use the hospital phone to call the Axis staff at the house or the Axis nurse and ask them to find and fax the information to the hospital. Examples may include another copy of the generic referral, last 24 hours health notes, individual's last recorded bowel movement etc.). The phone numbers for the Axis nurses are listed on the top left of the first page of the generic referral.

5. Do not sign anything. Sometimes the hospital or clinic staff will ask you to sign some forms. The answer is no. Some forms ask if it is ok to give someone a sedative to calm them down for a procedure. They may also ask for a signature on a consent, privacy or payment form. Again, the answer is always no. We are not the person's guardian, so we can never approve or sign for anything. We can only give them the name and phone number of the person's guardian which is listed on the second page of the referral form under "Guardian". If they need approval, consent or a signature, show them the guardian's phone number on the bottom half of page two of the referral under the Contacts. It should be the first entry and labeled Guardian.

6. Stay at hospital until the person is admitted or can return home. You must stay at the hospital until the emergency department doctors and nurses determine if the person is stable enough to return home or if they need to be admitted to the hospital. Admitted means the person will be moved to a regular hospital room and stay overnight. If the person is admitted, you must accompany them to their room, help them get settled and meet with their floor nurse to review the person's day timer with them.

If The Person Is Sent Back Home

1. Have doctor complete and sign second to the last page of generic referral. If the person is to be sent home from the emergency department, make sure to have the doctor fill out the last page of the generic referral form describing their findings, any new orders or medication changes and any follow-up appointments needed. This form needs to be signed by the doctor and brought back home.

2. Review emergency department paperwork. Sometimes the emergency department personnel were busy and did not sign the Axis generic referral. We cannot bring the person home without some kind of paperwork from the hospital. If the doctor or nurse provide their own paperwork on the visit, review this information with them and make sure that the reason for the visit is listed, any new medications or doctor orders are described and any need for a follow-up appointment is

noted. If this information is present, you do not need to have the Axis generic referral filled out and signed. If you cannot read something, ask the doctor to write it more clearly as you will need to be able to transcribe this into a health note when you return home.

3. Help person prepare to go home. If the person is to be sent home and is stable enough to go with you, help them to dress for the weather and assist them into their wheelchair (if applicable) and transport them back to the Axis home in the van.

4. Arrange special transportation if needed. If the person is to be sent home and special transportation is required, ask the hospital staff to help you arrange this.

5. Assist person to freshen up upon returning home. When the person returns to the Axis home, you must assist the person to freshen up and rest.

6. Take the person's vital signs. Document their vital signs by using the Enter Vitals/Temp button on the Document Main Menu screen.

7. Fax the generic referral form and any other hospital paperwork to the Axis nurse. When a person returns home, the staff person who brought them home must immediately fax the generic referral and any other hospital paperwork to the Axis nurse.

8. Call the Axis nurse and report that the person is home. Explain that you have faxed the nurse the generic referral form and all other hospital paperwork. Report to the nurse the person's vital signs and current condition. If the person missed a meal while at the hospital, ask the nurse if this should be provided or wait until the next scheduled time. The nurse will review the paperwork and set up any new medications, treatments and daily planner items. In addition, the nurse will give instructions for monitoring sites of injury and administering physician ordered treatments.

9. Discuss with nurse about any medications missed while the person was at the emergency department. Direct support staff will check their MAR and determine if any medications were missed while the person was away from the home and call the nurse. The Axis nurse will also check the referral form and the online MAR for the times of last medications given and determine with the direct support staff which medications were missed while the person was out the home. The nurse will also read any doctors instructions on page 4 of the referral form regarding missed meds and if needed, will put a one time order into the MAR. The nurse then calls the staff and instructs them which medications to give and which ones to hold and makes a health note regarding those orders in the computer.

10. If the doctor orders regarding missed meds seems incorrect or is not recorded on the referral form, the nurse must double check which meds were missed and call the doctor to request instructions whether to give the missed doses or not. For example, a med might have been missed, but the next dose is due to be given soon. The nurse will clarify with the doctor what to do and upon receiving the doctor's instructions, the nurse puts a one time order into the MAR and then calls the direct support staff and instructs them which medications to give and which ones to hold. The nurse then makes a health note summarizing the doctor's instructions.

11. After talking with the nurse, the direct support staff gives the specified medications and documents on them in the MAR. If told to hold any medications or to make up any doses, the direct support staff will make a variance in the MAR explaining that the med was on hold or late as per the nurse's and/or doctor's instructions. The direct support staff should also make a health note explaining what the nurse told them to do so that oncoming staff will know that the instructions were followed.

12. Notify team members that the person is home from the hospital. Once the person is home and settled, the direct support staff must contact the person's family or guardian, case worker and the Axis Manager on Call to report that the person has returned home. Describe to them the reasons for the emergency department visit, any findings, new orders or medication changes and follow-up appointments needed.

13. Summarize what happened in a health note. Make a health note describing the reasons for the emergency department visit, any findings, new orders or medication changes and any follow-up appointments needed. State that you faxed this information to the Axis nurse who will enter any new medications or doctor's orders.

14. Complete the checklist on the generic referral form. Complete the bottom section of the second to last page of the generic referral form. To do this, refer to the instructions in Easy Axis Record #3059 regarding How to Assist Someone on a Medical Appointment (Before, During and After). Scroll down to the After section and complete those steps.

15. Monitor the individual's health. It is the responsibility of direct support staff to take and document the person's vital signs upon return from the emergency department and monitor and document their health status. Notify the nurse and your supervisor if there are any additional complications or problems. When the injury is resolved, notify the nurse and your supervisor again.

If The Person Is Admitted To The Hospital

1. Help the person settle into their hospital room. Go with the person from the emergency department room to their hospital room and help them to unpack their bag and settle into their room.

2. Meet with the person's hospital nurse and review the generic referral form with them. Meet the person's nurse and inform them about the person, any behaviors, medical issues or medical equipment the person may need. On the referral, show them the list of medications that the person takes. Show them how to contact the Axis house and Axis nurse if they have questions. The Axis nurse phone numbers are listed on the top left of the first page of the referral. Show them how to contact the person's guardian, primary doctor or other specialists. Review the person's allergies, diagnoses, nutrition orders and medical devices. The nurse should also ask you the time of last medications given. Look at the last page of the generic referral for these two items. If no information is written there, call the Axis house and ask them to check the printed paper copy of the daily MAR to determine the last time the person received meds before they were sent to the hospital. On that last page of the referral, draw a line under the last med given and show this to the hospital nurse.

3. Review the person's Day Timer with the hospital staff. Show the hospital staff how to use the day timer and how to care for the individual. Make sure they know if the person can eat orally or not. Ask the nurse if they have any questions.

4. Determine with the hospital nurse if other supplies or medical devices from the home are needed. For example, does the person need their wheelchair, CPAP machine, orthotics, extra clothing, games or activities at the hospital. Upon return to the house, make a reminder note for these to be delivered to the hospital during the next shift.

5. Ask for and write down the person's room number and phone number, the nurse's phone number and nurse's name. Ask and write this information down before you leave. You will need this information when you return to the house to make your health notes.

6. Bring wheelchair up to person's hospital room. If the wheelchair is in the Axis van at the hospital, go back to the van and bring the person's wheelchair up to the room so that it is available for their use.
7. Return to Axis. After the person is settled in their room, you may return to the house.
8. Notify team members that the person has been admitted to the hospital. When you return to Axis, contact the Axis nurse, the person's guardian, case manager, family members and the Axis Manager on Call to report that the person has been admitted. Describe to them the reasons why they were admitted to the hospital and what type of procedures or tests are being conducted. Tell them what you know so far. Inform them which hospital the person is at, their room number and the nurse's station phone number and that you will call with an update when you know more.
9. Inform day program that the person is in the hospital. Call the person's day program and inform them that the person is in the hospital and that you will call again when the person returns home. You may have to call transportation to cancel their rides. Again, tell them you will contact them again when the person returns home and can return to work/school.
10. Summarize what happened in a health note. Make a health note describing the reasons for the emergency department visit and any information you know about their condition. Explain that the person has been admitted and include the name of the hospital, the person's room number and the nurse's station phone number in your note so other staff can contact the hospital when needed.
11. Arrange for items or information to be sent to hospital. If the hospital requested any other information, supplies or medical devices from the home, make arrangements for these items to be faxed or sent by the next staff person visiting the person in the hospital. Make a reminder note so that oncoming staff know what to bring with them.
12. Call the hospital every day for as long as a person is in the hospital. An Axis staff must call the hospital nurse each day to get an updated on their condition and ask when discharge is expected. Upon return to Axis, make a health note to update other staff about the person's condition and anything else to be brought down to the hospital for them.
13. Make daily report to team members. The staff who visits the person each day is responsible for calling the Axis nurse, person's family or guardian and case manager to give them an update on how the person is doing and when discharge is expected.

If A Person Was Admitted and Later is Being Discharged From The Hospital

1. Coordinate discharge time with hospital nurse. If during a visit, the hospital nurse informs you that the person is being discharged later, tell them that we will need some forms signed by the doctors before they can be released home. Tell them that the Axis nurse will fax the Axis Hospital Discharge Summary form and that this also needs to be signed by the doctor before the person can be discharged back to Axis. Ask when discharge is expected and write down the hospital nurse's phone and fax number. Give the hospital nurse the phone number of the Axis nurse. This is located on the top left of the first page of the generic referral form.
2. Call Axis Nurse and tell them when discharge is expected. Upon return to Axis, call the Axis nurse and tell them when the person is being discharged. Ask the nurse to call the hospital nurse and print a copy of the Hospital Discharge Summary and fax it to the hospital nurse. The hospital discharge summary form is the doctor's agreement that the person is stable enough to be

discharged from the hospital and back to Axis. It also states that the person is free of communicable diseases and states when the person can return to their school or day program. It also has the doctor's instructions on when a follow up appointment is needed. The person cannot return home until this is signed.

3. Follow Easy Axis policy 3202. Follow the procedures for How To Readmit an Individual to Axis After a Hospital Stay (Easy Axis #3202)

E. How to Report a Serious illness or Injury and Complete An Incident Report (Direct Support Staff Responsibilities) (# 3154)

1. Complete the First Report screen. As soon as the person is safe and has been sent to the hospital, the staff person at the house must complete an incident report. To fill out an incident report, go to the Timecard menu and click the "Incident Report" button. This will take you to the Incident Report Main Menu screen.

2. Enter person's initials and time and date of incident. Click on the "First Report" button. A box will appear that asks you to type the person's initials. A text box will also appear with initials and names for easy reference. Next, type the time of the incident. Example: 8:00 AM. Verify the date of the incident and change the date to the date the incident occurred if necessary. Click the blue "OK" button when finished. This will take you to the First Report Screen. If the box containing the list of names is still present, you may click the red dot at the top left of the box and it will close the box.

3. Fill in your name as the reporter. At the top of the First Report screen, type your name in the "Reporter" box.

4. Describe the incident. Type what happened in the "Description of Incident" box that is located below the "Reporter" box. Describe the kind of injury, its size and location. If you know how the injury happened, explain this. If you do not know how it happened, just describe the injury only. The description should be factual and should not use emotional language, assign blame or use the names of other residents or staff. Include anything that the nurse told you to do. For example, the nurse might have told you to clean the wound and apply a bandage or call 911 and send the person to the emergency department.

5. Did anyone see the incident? Go to the middle section of the First Report page. At the top is a question "Did anyone see the incident happen? Click "Yes" or "No".

6. Who saw it happen? In the section below this, it asks "Who saw it happen (if anyone)? Type the names of staff or other persons who observed the incident if known. Otherwise, write "no one".

7. Where did the incident happen? In the next section, it asks "Where did the incident happen? Click the box that best describes where the incident occurred. If you click other, a box will appear and you should describe where it happened and then click OK when finished. If location is unknown, click the "Don't Know" box.

8. What caused the incident? In the next section, it asks "What caused the incident? Click the box that best describes what caused the incident. If you click "other", a box will appear and you should describe what happened and then click OK when finished. If the cause of incident is unknown, click the "Don't Know" box.

9. Do you suspect abuse or neglect? The next question is highlighted in yellow because it is very

important. If you have any reason to believe that the serious injury/illness was caused by abuse or neglect, click the “Yes” box. Otherwise, click “No”. If you checked yes, you must call the Axis nurse and report to them why you suspect abuse. All Axis staff are mandated reporters. If you suspect abuse or neglect, you must report it. You can also call the Axis Manager on Call at 612-802-7089, your supervisor, or the Axis Administrator at 651-357-1107. Explain to them why you suspect abuse or neglect, how the incident happened, who you think might have been involved, who else was working at the time or who else may have witnessed the event. You may also contact outside agencies directly such as the county Common Entry Point for adults or Child Protection for minors. The point is you must tell someone right away so that Axis can begin the internal investigation process and make an initial report to the Common Entry Point or Child Protection within 24 hours of first knowledge of the incident. If you put the cursor arrow over the question “Do you suspect abuse neglect or exploitation?” A legal definition of abuse, neglect or exploitation appears on the screen to help you determine if actual abuse or neglect occurred.

10. Explain what corrective action you took. If you checked yes, write in the box what corrective action you took. For example, you observe another person forcing food down someone or you observe a staff person strike someone. The first thing you need to do is stop the abuse. Explain what you did to prevent the person from further injury. Another situation might be that you find someone on the floor with the side-rails of their bed in the down position. You would call the nurse and send the person to the hospital for evaluation. In this example, you would write exactly what you did, in the corrective action box. You called an Axis nurse, and then sent the person to the hospital. Include who you called about the incident. For example, “I called the nurse and house supervisor to report the incident and they told me to....”. However, when writing your note in the corrective action box, you should not write the alleged perpetrator’s name, as this is confidential. You must tell the nurse or your supervisor verbally, but do not type the person’s name in this box. For more information about reporting suspected abuse or neglect, refer to Easy Axis record 2078 for a minor and Easy Axis record 2100 for adults.

11. Verify that you called the nurse. The third section on the right side of the page has to do with notification. You should have already called the nurse, so click in the “Axis Nurse ID” box and a list of nurse names will drop down. Click on the name of the nurse you talked to. If needed, click on the down arrow next to the nurse names to scroll down and see additional names. Type the date and time you called the nurse in the boxes next to the nurse initials. Type your initials in the last box on the right.

12. Find the phone numbers for the family, guardian and case manager. Next, you must call the guardian and case manager and speak with them or leave a message. Note that sometimes the guardian is the same as the county case manager. Other times it is a person’s family member or relative. To find the guardian’s and case manager phone numbers, click on the blue “PCCR Contacts” button and a list of names and phone numbers will appear. Click on the small round green dot at the top left of the screen to expand the page to see all of the names. Look under the Agency Name column and find the words guardian and case manager. Write down the phone numbers and when finished click the small round red dot at the top left of the screen to exit the page and return to the Incident Report.

13. Call the family members, guardian and case manager. Explain who you are and where you are calling from. Tell them the person’s name. Remain as calm as possible. Avoid using emotional language and do not try to assign blame. Simply tell them, what happened and describe the injury. Inform them that you have called the nurse and are following their instructions. If the person was sent to the hospital’s emergency department, tell them the name of the hospital. Leave your name and the house’s phone number so they can call back if they have questions. Tell them that you will keep them updated and will provide more information as it becomes known.

14. Document calls made. Type the date and time you called the above people in the boxes next to the words Family or guardian and Case Manager. Type your initials in the last box on the right.

15. Call the Manager on Call. If emergency personnel (police, ambulance, fire) came to the Axis Home for any reason, you must also call the Manager on Call at 612-802-7089 and report the incident.

16. Enter description of incident into documentation. Next, you must put what you wrote into the person's medical records. To do this, click on the blue box where it states "Click here to create a new entry in documentation. Wait a moment. A Login screen will appear. Type your password in the box and click the gray "Continue" button below. This will take you to the Select Individual page. Click the button that has the initials of the house where the person lives. A list of individuals will appear. Click on the small circle next to the person's initials. Then click on the gray "Continue" button. This will take you to the Document Full View screen. You do not have to enter any additional information on this page, just click the gray "Continue" button at the bottom left of the screen. This will return you to the First Report screen.

17. Make sure First Report screen is complete. Review the First Report screen to make sure all sections have been completed. When finished, click the small round red dot at the top left of the screen. If the blue documentation screens or any other screens are still present, you can continue to click the small round red dots at the top left of each screen to close these also and return to the Timecards screen.

F. How to Report a Serious Illness or Injury and Complete an Incident Report (Nurse Responsibilities)

Review The First Report of Incident Screen

1. Make sure an Incident Report was started by DS staff. As soon as the person is safe, the nurse will document the incident. Unless the nurse was the person who witnessed the injury, it is the responsibility of the direct support staff at the house to initiate an incident report and fill in the First Report screen. After the person is safe and/or transported to the hospital, the Axis nurse who received the call from Axis staff, must ensure that the staff person has initiated an incident report and the nurse must complete the Evaluation and Notification screens for that report as soon as possible and before they leave their shift.

2. Find the incident report. As the nurse who was contacted, it is your responsibility to review the First Report of Incident screen and complete the Evaluation and Notification screens. To do this, go to the Timecards screen and click on the Incident Report button. This will take you to the Incident Report Main Menu screen. Click on the Find button. This will take you to the Find Screen. Click into the ID box. A list of initials and names will appear. Using the scroll bar on the right, click on the down arrow until the name of the person appears. Click once on their name and it will put the initials in the ID box. Type the date of the incident in the Date of Incident box and then click the blue Continue button at the top right of the screen. This will take you to the First Report screen. You can also ask the DS staff what the report number is and do a find that way too.

3. Review First Report screen for accuracy. Review the First Report screen and make sure the Description of Incident section accurately describes what happened. The descriptions should be factual and not use emotional language, assign blame or use the names of other residents or staff. This information will go to the doctor and day program so make sure all items are accurately described and have been checked or completed. If needed, call the staff and instruct

them to better describe what happened or to fill in any missing items on the first report screen. Ask the staff to help you better understand the incident and sequence of events leading up to the injury. This will help you to better complete your sections of the incident report. Ask the staff person questions about the incident and to your best judgment, determine if the cause of the injury is known or unknown.

Completing the Evaluation Screen

1. Open Evaluation screen. As a nurse, it is your responsibility to fill out the Evaluation and Notification screens. From the First Report screen, click on the gray Evaluation button at the top of the screen. This will take you to the Evaluation screen. You will notice the description of incident from the First Report page will appear again on the left side of the screen.

2. Determine nature of injury. Based on your discussions with the staff at the house and the review of other recent health information, determine the nature of the injury. Under the Nature of Injury section, click the small box that best describes the injury. If the injury does not fit the predetermined categories, you can click the box next to the word "Other" and a dialog box will appear where you can describe the kind of injury. If the incident did not involve an injury, click the None box at the top of the page. Click the blue OK button when finished.

3. Click the blue Main Documentation Menu button If you need to review any documentation about the person.

4. Wait to Create Daily Planner Items for Monitoring until person is home from hospital. You cannot completed the section titled "Create Daily Planner Items for Monitoring" until the person has returned from the clinic or hospital, so you will skip this section for now. When the person returns from the hospital or clinic, you must go back to the Evaluation page and set up a daily planner entry for the injury to be monitored at least once per day. For example: 7 AM.

5. Describe the location, size, shape and color or injury. In the Detailed Description box on the right side of the screen, provide a detailed description and the location of the injury. It is important to state if the injury was actually observed by you or it it was described to you by the staff reporter or consumer. Describe the shape, size and color of the injury. Do not diagnose it, just describe it.

6. Review health information prior to incident. Before you fill out the Probable Cause box, you want to understand if there was any health events that led up to the injury. To do this, review the person's health notes on the right side of the Evaluation screen to see if any of the notes might be related to the incident. The nurse should also review the other information on the far right hand side of the screen related to the last few daily wellness checks (IPP 77). These may provide information that might indicate a cause or possible events that led up to the incident. Look at the section titled IPP 88 and click into the box. This will give you a list of known past incidents that this type of injury may be related to. Another source of information to review would be the second page of the Shift Report as this would include the person's last vital signs, food/fluid intakes and last void/BM information.

7. Determine possible causes of injury. The main question you are trying to answer is if the cause of the event is known or unknown. Based on your discussions with staff and your review of the recent health information, type in the Possible Causes box how the injury occurred if known. To help you determine the possible causes, use the questions below. These are also located at the bottom of the Evaluation screen. Type any information you find out in the Possible Causes box.

General Interview Questions

1) Do you know how the injury occurred? Attempt to reconstruct the sequence of events with

them and who was doing what at the time

of the injury. Describe the events in chronological order

2) Was anyone alone with the consumer prior to the injury? If so, what is their name and how can they be contacted?

3) Do you know of anyone else who was present or may have information? If so, what is their name and how can they be contacted?

4) Was anyone removed from the schedule or denied access to the vulnerable person to protect the vulnerable person?

Assessment of Environment and Equipment

1) Where was the person and what activities were they involved in prior to the injury?

2) What equipment or items in the environment were being used and who was doing what at the time at the time of injury? Describe the events in chronological order.

3) Was there anything in the environment or equipment being used that could have caused the injury. For example, look for any damaged equipment (side rails, lift, wheelchair, shower chairs, therapy equipment, orthotics or furniture) Check these for any sharp or blunt surfaces that could have caused the injury.

4) Was staff properly using the equipment and following the person's job aid or safety requirements from Axis policies/procedures?

Check their training record or recent staff meeting minutes to see if this topic has been covered.

Assessment of Risk of Self Injury

1) What activities was the person involved in prior to the injury?

2) Was there any change of behavior in the person prior to the injury and what may have caused/contributed to it?

3) Does this consumer have a history or self-injury that may be related to this particular injury? If so, review the individual's ISP, IPP programs, job aids, and past incident reports. In addition review their risk management plan.

This may help determine whether the

consumer has a history of self injury. Reviewing the risk management plan may help determine what contributed to this particular

injury. If this is the case make sure this information is included in your documentation.

Assessment of Prior Health Information

1) Was there any change in the person's health or medical condition prior to the injury?

2) Were there any new medications or recent medical appointments or illnesses that could be related to the injury?

Information from School/Day Program or Other Agencies

1) Did the school or day program report anything unusual? Check the person's day program communication in their day timer. Also, check for any nurse faxes from day program. If needed, contact day program staff and interview them.

2) Do you know of anyone else who may have information? If so, what is their name and how can they be contacted?

8. Describe any first aid given or if the person was sent to ER. In the box titled "What Did You Do?" "Treatment Provided" or "Sent to ER", describe any first aid that was provided. If there was no first aid given, was the person sent to the ER or to their primary physician? Another example would be if you removed a piece of broken equipment from service, note this also in this box for

example.

9. Do you suspect maltreatment (i.e. abuse, neglect or financial exploitation)? The next question is highlighted in yellow because it is very important. If you have any reason to believe that the serious injury/illness was caused by abuse or neglect, click the “Yes” box. Otherwise, click “No”. If you checked yes, you must call the Axis Administrator immediately at 651-357-1107 and report why you suspect maltreatment and who was involved. All Axis staff are mandated reporters. If you suspect maltreatment, you must report it. You must also call the Axis Manager on Call at 612-802-7089 and the house supervisor of the home where the person lives. You may also contact outside agencies directly such as the country Common Entry Point for adults or Child Protection for minors. The point is you must tell someone right away so that Axis can begin the internal investigation process. Axis will make at least a verbal report to the Common Entry Point or Child Protection within 24 hours of first knowledge of the incident. If you put the cursor arrow over the question “Do you suspect abuse neglect or financial exploitation?” A legal definition of abuse, neglect or financial exploitation to help you determine if actual abuse occurred.

10. Explain what corrective action you took. If you checked yes, write in the box what corrective action you took. An example of this would be if you observed another person forcing food into an individual’s mouth and you stopped them. Yet another example would be if you observe a staff person strike someone. In other words, the first thing you need to do is stop any physical or verbal abuse. Explain what you did to prevent the person from further abuse. It is important to discuss with the Administrator what to do and then follow their instructions. For example, if a staff person is suspected of maltreatment, they must be taken off the schedule and sent home. The individual is not allowed to return to work until the investigation is complete. It is also possible that another non-Axis person caused the alleged maltreatment. This individual could be a relative, day program staff or a van driver. Regardless of who it is, Axis must make sure that the person does not have contact with the alleged victim, until the investigation is complete. Make sure to verbally inform the Administrator the names of the alleged perpetrator. However, when writing your note in the corrective action box, you should not write the alleged perpetrators name in the box, as this is confidential. For more information about reporting suspected maltreatment, refer to Easy Axis record 2078 for a minor and Easy Axis record 2100 for adults.

11. Enter description of injury into documentation. Next, you must put what you wrote into the person’s medical records. To do this, click on the blue box where it states “Click here to enter description of injury into documentation. Wait a moment. A LogIn screen will appear. Type your password in the box and click the gray “Continue” button below. This will take you to the Select Individual page. Click the button that has the initials of the house where the person lives. A list of individuals will appear. Click on the small circle next to the person’s initials. Then click on the gray “Continue” button. This will take you to the Document Full View screen. You do not have to enter any additional information on this page, just click the gray “Continue” button at the bottom left of the screen. This will return you to the Evaluation Screen.

12. Review all items for completion. Before moving on to the Notification screen, review all items and boxes on the Evaluation screen to make sure they are correct and complete before proceeding.

Completing the Notification Screen

1. Go to Notification Screen. The next screen is the Notification screen which lists all people who must be contacted about the incident. Begin by clicking the gray Notification button at the top of the Evaluation screen. This will take you to the Notification screen.

2. Acknowledge notification of the incident. At the top of the page, click on the box next to the

words “I acknowledge notification of the incident.” Your initials should appear. If not, type your initials in the box below. Type the date in the box below your initials.

3. Click the boxes for known or unknown injury. Under the Notification Grid in the middle of the screen, click on one of the first three choices, click the box for No Injury: Change of Condition, Injury of Known or Likely Source or Injury of Unknown or Suspicious Source.

4. Click the box for type of Incident. In the lower section, click the box that best describes the incident. More than one box can be checked. For example, if the person was sent by ambulance to the hospital for a serious injury, both the Serious Injury and Emergency Transport boxes should be checked. Review the colored notification boxes on the left side of the screen.

5. Determine who needs to be notified. Notice the colored boxes next to these items. These colored boxes correspond to who must be notified on the notification grid on the left side of the screen.

Purple Boxes = the person’s Physician, Family or Guardian, Case Manager, and Day Program.

Yellow Boxes = the Axis Manager on Call

Green Boxes = the Axis Administrator

As a mandated reporter, you may contact the below agencies directly if desired. However, for any serious injury, Axis must complete an investigation and report it within 24 hours. It may be useful to wait until the facts are better known and the initial investigation is completed before calling the below agencies. With any serious injury, call the Administrator immediately. They will assign someone to conduct the investigation and the person doing the investigation will make the below contacts when the initial investigation is complete.

Green Box = Common Entry Point

Red Boxes = State Ombudsman office and Office for Health Facility Complaints (OHFC) for ICF/MR Programs or the State Ombudsman office and DHS Licensing for Waiver Programs.

6. Notify physician. If you checked a box next to a corresponding purple notification box, you must notify the person’s physician. To print the fax for the physician, click on the gray fax button on the left side of the screen by the words Physician. A fax page will appear with the information from the Evaluation page. Click the gray Print button at the top left of the fax screen and when the print dialog box appears. click the blue Print button. After the fax is printed, click the grey box on the right side titled Return and this will take you back to the Notification screen. Take the fax and fax it to the Physician. When finished, type the date, time and your initials in the boxes provided next to the words “Physician” on the Notification screen.

7. Check to see if guardian and case manager were called. If you checked a box next to a corresponding purple notification box, you must make sure the guardian and case manager have been called. The direct support staff that completed the first report page should have already called the guardian and case manager. The date and time for these calls should appear on the notification page. If not, call the staff person back and inform them to do this immediately. Make sure that they do this and that the notification boxes on the right side of the screen next to family or guardian and case manager are filled in and completed. This is required.

8. Notify day program. If you checked a box next to a corresponding purple notification box, you must also fax the day program. It is the nurse’s responsibility to notify the person’s day program. To print the fax, click on the gray fax button on the left side of the screen by the words Day Program. A fax page will appear with the information from the Evaluation page. Click the gray

Print button at the top left of the fax screen and when the print dialog box appears. click the blue Print button. After the fax is printed, click the gray box on the right side titled Return and this will take you back to the Notification screen. This information is then faxed to the Day Program. When finished, type the date, time and your initials in the boxes provided next to the words “Day Program” on the Notification screen.

9. Call Axis Manager on Call if needed. If you checked a box next to a corresponding yellow notification box, you must contact the Axis Manager on Call at 612-802-7089. The most common scenario is whenever emergency personnel (police, ambulance, fire) arrive at the house, the nurse must call the Manager on Call. When finished, type the date, time and your initials in the boxes provided next to the words “Axis MOC”

10. Contact the Axis Administrator at 651-357-1107. If you checked a box next to a corresponding green notification box, you must contact the Axis Administrator immediately. The Administrator is contacted for more serious types of incidents and those of unknown origin. These include unknown injuries, serious injuries, deaths, forced sexual activity or suspected maltreatment. These situations require that an investigation take place. The investigation needs to be reported to a number of outside agencies within 24 hours. If you have not already done so, contact the Administrator and explain what happened, and whom you have contacted so far. Who was allegedly involved? What were the possible causes? Do you suspect abuse or maltreatment?

11. Determine with the Administrator who will conduct the investigation. The Administrator will contact the Director of Program Services, House Supervisor or the Manager on Call to conduct the investigation. They will then follow the instructions in Easy Axis #3258 How to Investigate a Serious Injury or Death and Report to Outside Agencies (Administrator, DPS, PS, MOC Responsibilities). The person who does the investigation will be responsible for completing the investigation and notifying the outside agencies within 24 hours of the incident. The nurse does not have to do this. After you complete your call to the Administrator, type the date and time you called them in the boxes next to the word “Administrator” on the left side of the Notification screen. Of course, if you as a nurse believe that abuse or maltreatment has occurred, you can choose to report to an outside agency directly.

12. Inform the Axis investigator how they can reach you. Call or e-mail the Axis staff person who is doing the investigation. Tell them how they can contact you in case they need to ask for more information. Remember the investigation needs to be completed within 24 hours, so they may need to call you at home for more information.

13. Review Notification page for completion. Look over the Notification screen and compare the colored boxes and the notification boxes to make sure everyone who was to be contacted has been notified. The only notification boxes that should not be filled in are:

- Common Entry Point (various counties)
- MDH OHFC (Minnesota Department of Health: Office of Health Facility Complaints)
- DHS Licensing (Minnesota Department of Human Services: Licensing Division)
- Ombudsman (Minnesota Office for the Ombudsman for Mental Health and Developmental Disabilities)

These groups will be notified after the investigation is complete by the person assigned to complete the investigation.

14. Enter contacts into the person’s record. Next, you must put the contacts into the person’s medical records. To do this, click on the blue box where it states “Click here to document contacts into the client’s record. Wait a moment. A LogIn screen will appear. Type your password in the box and click the gray “Continue” button below. This will take you to the Select Individual

page. Click the button that has the initials of the house where the person lives. A list of individuals will appear. Click on the small circle next to the person's initials. Then click on the gray "Continue" button. This will take you to the Document Full View screen. You do not have to enter any additional information on this page, just click the gray "Continue" button at the bottom left of the screen. This will return you to the Notification Screen.

G. Followup Procedures for a Serious Illness or Injury Incident Report (Nurse Responsibilities)

1. Enter new orders and/or medications. When the person has returned from the emergency department, the nurse must:

- review the hospital paperwork
- put any new orders, treatments or medications prescribed by the doctor into the online Medication Administration Record
- order any new medications from the pharmacy (if meds are to be given during day at day program, order split cards).
- fax a copy of any new orders ordered from the pharmacy to the house where the person lives.
- fax new orders or medication changes to the person's day program if needed.

2. Determine what to do about any missed medications. When a person has returned from the emergency department, it is possible that they missed some medications if they were gone more than a few hours. Call the TMP at the house to determine last medications given and check the referral form to determine if the doctor has indicated what to do about these. If no information has been provided, you may need to contact the doctor to determine which meds should still be given. When this information is clear, adjust the daily MAR and call the TMP at the house and give them instructions about which meds to give and which ones to hold. Document this in a health note.

3. Make a summary health note. Create a health note describing the person's health status, new orders and medication changes so that the direct support staff know the outcome from the hospital. Your health note should also include any monitoring needed or new doctor's orders to be followed.

4. Set up daily planner items for monitoring. When the the person has returned home from the clinic, emergency department or hospital, you will also need to create daily planner items for the staff to monitor the injury at least once a day (more if needed). Return to the Evaluation page of the Incident Report. At the bottom of the page, click on the blue box to the left of the words "Create Daily Planner Items for Monitoring" This will bring you to a Daily Planner Incident Report Screen. The record should appear at the bottom of the page. Verify the person's name is in the gray box. In the large pink box, type the words, "Monitor and document on..." followed by a description of the location and size of the injury. Type "7 AM" or another time if needed in the blank pink box to the left of the person's initials. When finished, click on the small red dot at the top left of the screen to close the window. This will return you to the evaluation screen. The daily planner item should appear at the bottom of the screen.

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5. Add follow-up information to the What Did You Do/Treatment Provided box. Return to the Evaluation page of the incident report. Add a paragraph to the Initial Treatment Provided or Action Taken box. Explain what the emergency department or the person's doctor said about the injury. Next document any new orders to be followed. You can cut and paste your previous health note related to the person's return from the hospital in this box if desired.